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Online consultations – frequently asked questions and support resources

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What's the requirement?

From 1 October 2025, practices will be required to keep their online consultation tool open for the duration of core hours. As part of the agreement with the GP Committee for England (GPCE), it was agreed this was, as a minimum, for non-urgent appointment requests, medication queries and admin requests. Some practices, for example, those that use total triage models, may choose to accept an urgent request through their online consultation tools if this is appropriate for their practices and supports their local operating model.

Practices have been required to ensure patients can contact their practice by phone or walking in throughout core hours since 2004.

What's the aim?

We want patients to be able to contact their practice, by phone, online or by walking in, and for people to have the same experience whatever approach they use to get in touch. This is a key intervention in the government's ambition to end the 8am scramble for appointments.

Is this optional?

No, all GP practices with a primary medical care contract must comply with the contract requirements on online consultation systems from 1 October 2025, that requires all practices have their online consultation tools switched on for at least core hours.

What help is available to support practices in moving to online consultation throughout core hours?

General practice has received support over recent years to move to modern general practice access and digital triage approaches. NHS England has supported the switch to digital telephony, provided digital software and tools, provided transformation funding and training through, for example, the <u>General Practice Improvement Programme</u>

(https://www.england.nhs.uk/gp/national-general-practice-improvement-programme/).

A range of support for practices to implement online access is on offer. This includes:

- guidance on how to implement modern general practice and online consultations including self-assessment tools for
 practices to baseline and develop action plans, practical how to guides, assessment of functionality and useability of
 online system suppliers, improvement guides for care navigation and practice processes
- a series of joint webinars from NHS Confederation and NHS England to showcase best practice, case studies, and advice from localities who have successfully implemented and use online consultation tools
- regions and integrated care boards (ICBs), working with practices to identify those who may be struggling with the
 requirements, so they can offer more focussed support including the support of peer ambassadors (GPs and practice
 staff who are experts in service redesign and improvement in general practice)

NHS England » National General Practice Improvement Programme (GPIP) resources

(https://www.england.nhs.uk/gp/national-general-practice-improvement-programme/resources/)

NHS England » How to improve care navigation in general practice (https://www.england.nhs.uk/publication/how-to-improve-care-navigation-in-general-practice/)

GP contract and online consultation tools – best practice guidance | NHS Confederation

(https://www.nhsconfed.org/events/gp-contract-and-online-consultation-tools-best-practice-guidance-0)

What is the ask of ICBs?

We are asking ICBs to continue working with general practice and identify any practices who may be struggling to implement online consultation. ICBs are asked to support these practices to go live and use the support available.

Are there any risks to patient safety?

Patient safety remains paramount, and it was agreed that the new requirement for all practices would come into effect on 1 October 2025 to allow GP practices to put the necessary safeguards in place in the six months between March and October 2025. Such safeguards are for example, placing a message/banner on a practice website and/or online consultation tools (if that was their preference), stating that urgent clinical requests should be made in person or via telephone, to avoid urgent clinical requests being incorrectly submitted online.

Practices are able to review the standard wording provided by their online consultation system supplier to ensure it accurately describes the service. The information should clearly state the tool is not appropriate for urgent medical needs, explain how patients can access support for urgent situations, set clear expectations about the service, and describe how consultations will be processed.

Practices should make efforts to keep patients informed around next steps when a consultation is submitted. In line with the contract, patients should know on the day how their presenting issue will be handled (if contact is made during core hours, or the following day if not). That does not mean the practice has to see or treat the patient on the same or next day, rather the patient should know how their presenting issue will be managed by the practice, which could involve arranging an appointment for the patient on another day, or signposting to another appropriate service, such as Pharmacy First. 111 would not constitute an appropriate alternative service during core hours.

Practices can and should put relevant safeguards on their webpages, explaining crucial pieces of information and managing the expectation of patients, for example, where it supports the practice's local operating model, practices may want to include patient messaging on their website or online consultation tools, for example, requesting that urgent requests should be made by phone or walk-in, rather than online. The arrangement with the website provider must be made by the practice, as practices may have different operating models to support workflow. NHS England has published advice on GP websites: https://www.england.nhs.uk/long-read/creating-a-highly-usable-and-accessible-gp-website-for-patients/)

What is urgent?

Assessing a patient as urgent should be based on clinical judgement. Definitions will not be defined nationally and are for local clinical judgement.

Can numbers of online consultations be capped?

NHS England does not support limiting clinical contacts to a specific number but encourages practices to improve their operational processes and capacity so that demand can be effectively managed.

Can a practice switch off online consultation during core hours?

GP practices must not switch online consultation off during any core hours period, except in exceptional circumstances. This would need to be communicated to and agreed with the commissioner, in the same way the practice would need to for phone line or walk in.

What happens if a practice doesn't do this?

Commissioners will follow up with practices that do not have online consultation on throughout core hours to support adoption throughout core hours.

Is subcontracting to GP Out of Hours allowed or not during 18:00-18:30?

Whilst practices may sub-contract clinical services under the terms of their contract, those subcontracted services must meet the reasonable needs of patients and be capable of providing the same level of services, which would include seeing a patient in person if needed, answering telephone calls, responding to routine appointment requests, or responding to online consultation submissions.

Subcontracting arrangements should be discussed with the commissioner on a practice by practice and case by case basis. It is not appropriate for commissioners to approve or agree to sub-contracting en-masse e.g. across wide geographies such as across an ICB during lunch or at either end of core hours, or to agree such arrangements on a long term or regular basis.

Provisions still remain for practices to agree temporary local variations to their normal service provision to allow for activities such as practice learning time but this should not be a blanket regular arrangement.

What support is available to practices to increase online consultation use?

Where online consultation requests and activity is low, identify what actions are required to improve the uptake; examples include:

- · using national online consultation data to identify gaps and opportunities for improvement
- raising awareness through local communication channels (for example, social media) and local networks (for example, PPG focus groups)
- · sharing peer to peer learning
- · using ambassadors to support online consultation promotion where available via the NHS App
- · using the NHS App dashboard for review to make improvements

How does this link to total triage?

Total triage is not a contractual requirement. However, modern general practice (which is broader than total triage but encompasses many of the same approaches) will support practices to effectively and safely manage demand and provide fair access to patients. Our resources can support you with the implementation of modern practice: https://www.england.nhs.uk/gp/national-general-practice-improvement-programme/resources/)

How does this link to You and Your General Practice?

You and Your General Practice (https://www.england.nhs.uk/publication/you-and-your-general-practice/) provides information for patients, in easy to understand language, on what to expect from general practice and in return what patients can do to play their part in accessing general practice It states that patients should receive a response to their request or query within one working day. This could be being booked in for an appointment, a phone call to discuss their request, a text message or advice to go to a pharmacy or another NHS service.

The contractual requirement remains that patients should know on the day how their presenting issue will be handled. That does not mean the practice has to see or treat the patient on the same or next day, rather the patient should know how their presenting issue will be managed by the practice, which could involve arranging an appointment for the patient on another day, or signposting to another appropriate service.

Will the Clinical Negligence Scheme for General Practice (CNSGP) provide cover for clinical negligence claims arising from triaging patients' healthcare requests, including for appointments requested or booked online, following the requirement on practices from 1 October 2025 to expand online access for patients?

Yes. CNSGP will provide indemnity cover claims arising from triaging patients' healthcare requests, including for appointments requested or booked online, as part of primary medical services provided under a GP contract in England.

Online consultation submissions - aide memoire of available support

1. Creating a highly usable and accessible GP website for patients

This guidance supports the implementation of online consultations in general practice. It includes information about:

- · Improving online journeys for patients using GP websites
- · How to encourage patients to use online journeys
- · How to support patients to use the NHS App and other apps
- How practices working at scale within PCNs can create highly usable and accessible online journeys for patients and save time and money. Advice on ways to handle urgent appointments, for example section 3.9
 appointments-page)

NHS England » Creating a highly usable and accessible GP website for patients (https://www.england.nhs.uk/long-read/creating-a-highly-usable-and-accessible-gp-website-for-patients/)

2. How to improve care navigation

This guidance supports practices to improve the process of assessing, prioritising and allocating patient requests, including the use of online consultation tools. The relevant sections are:

- Choosing your digital tools (https://www.england.nhs.uk/long-read/how-to-improve-care-navigation-in-general-practice-2/#choosing-your-digital-tools)— this has information about patient needs around managing expectations around response times.
- Making a decision about allocation (https://www.england.nhs.uk/long-read/how-to-improve-care-navigation-in-general-practice-2/#making-a-decision-about-allocation) and <u>Assessing urgency versus continuity of care</u> (https://www.england.nhs.uk/long-read/how-to-improve-care-navigation-in-general-practice-2/#assessing-urgency-versus-continuity-of-care) this covers guidance on how to make safe decisions when allocating patient requests.
- <u>Safety considerations (https://www.england.nhs.uk/long-read/how-to-improve-care-navigation-in-general-practice-2/#safety-considerations)</u>— this section outlines the resources and requirements for a practice, including digital safety requirements and designing a safe process.

NHS England » How to improve care navigation in general practice (https://www.england.nhs.uk/publication/how-to-improve-care-navigation-in-general-practice/)

3. Understanding patient and general practice staff needs from online consultation tools

This guidance describes the needs of different users of online consultation tools, covers learnings from research with patients and general practice staff. It also contains comparisons of functionality and usability of the main suppliers.

<u>Understanding patient and general practice staff needs from online consultation tools – Digital Primary Care – Futures (https://future.nhs.uk/DigitalPC/view?objectId=173457381)</u>

4. NHS Confederation and NHS England OC webinars

Three webinars took place over the summer to support practices ahead of the 1 October contractual requirement and answer their questions. Links to the webinars are provided.

- 6 August Webinar: 6 Aug webinar recording and slides Practice support on implementing online consultation tools and contractual requirements (https://future.nhs.uk/P_C_N/messageShowThread?threadID=15376270)
- 4 September Webinar: 4 Sep webinar recording and slides Practice support on implementing online consultation tools and contractual requirements (https://future.nhs.uk/P_C_N/messageShowThread?threadID=15475246)
- 11 September Webinar: 11 Sep webinar recording and slides Practice support on implementing online consultation tools and contractual requirements (https://future.nhs.uk/P_C_N/messageShowThread?threadID=15499374)

5. Online Consultation Submissions in Core Hours Dashboard

NHS England have created a proxy tool to support ICBs understand the demand on general practice based on the published data. The data can be broken down to National, ICB and Practice level.

<u>Online Consultation Submissions in Core Hours Dashboard – Digital Primary Care – Futures (https://future.nhs.uk/connect.ti/DigitalPC/view?objectID=66502672)</u>

6. Digital total triage clinical risk summary

These slides have been developed to supplement the Digital Total Triage and Video Consultation Clinical Safety Case Interim Report (DCB0160). The report supports to support general practice to safely and successfully deploy nationally assured online consultation software.

<u>Digital triage clinical risk summary (DCB0160) – Digital Primary Care – Futures (https://future.nhs.uk/DigitalPC/view?objectID=77779205)</u>

7. Further best practice example

An example of best practice that focuses on meeting the growing demand on general practice that may be beneficial to review by practices looking for a case study. For context, the practice has a patient list size of approximately 6,500 and focuses on the practices efforts in improving their digital accessibility, improving triaging processes whilst ensuring patient safety and managing demand of general access.

Improving accessibility measures to enhance patient experience – Primary Care Improvement Connect (https://future.nhs.uk/PrimaryCareImprovementCONNECT/page/casestudy/view?
objectID=53480080&nextURL=%2FPrimaryCareImprovementCONNECT%2Fpage%2Fcasestudy%2Flist%3FstartRow%3D1

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