

Practice based nurse telephone triage using Odyssey TeleAssess: reduce practice costs, satisfy patients and improve safety and continuity of care

Extending access and improving waiting times in general practice are an NHS priority. The challenge is how to achieve this without endlessly increasing the supply of appointments.

Research shows that about half of patients who attend for a same day appointment could have been adequately offered self-care advice over the phone.

Practices now have the option of using Odyssey TeleAssess in support of nurse telephone triage to achieve this. This computerised decision support allows a cost effective and highly acceptable means of managing demand, enabling them to identify which patients need to be seen at the surgery and which can safely be offered advice.

Nurse telephone triage encourages self-care, manages medico-legal risk and supports continuity. With Odyssey TeleAssess, it offers patients immediate access to validated self-care advice that is appropriate to their needs. It allows more effective management of the pressure on appointment systems, so reducing waiting times for urgent problems and enabling resources to be released for the care of long term conditions, maximising QOF performance and/or for developing special interests that can relieve the pressure on secondary care services. It helps free-up GP time away from managing minor, self-limiting conditions towards activities that achieve much greater health gain for the population and benefit the practice.



The public has ever increasing expectations to seek general practice advice at times that are convenient. Most general practice consultations are still centred on face to face contact. This is costly in terms of clinician time and other organisational resources, and also tends to re-enforce dependency on attending the GP rather than self-care. The public has an increasing need for reassurance regarding health issues, and nurses are known to be particularly effective at this, with high levels of patient satisfaction. The public is increasingly prepared to make use of telephone and internet communication for advice, and there are considerable opportunities for general practices to shift the emphasis of same day care towards such forms of contact.

Patients prefer talking about their problems to professionals whom they know, and who have ready access to their medical records and have local knowledge. This is why practice-based nurse telephone triage can be so much more effective than NHS Direct.

Nurses have been found to be highly cost and clinically effective at triaging out of hours calls using Odyssey, as well as in hours in primary care. The same has not been proven

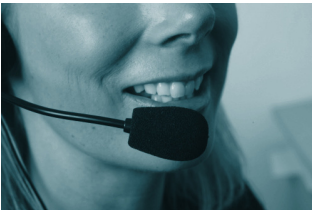
for nurses undertaking telephone triage without access to Odyssey. For example, a study with three practices in York where nurses were supported by management protocols found that triage resulted in reduced GP time but did not reduce costs.

Saves GP time and money

In a randomised trial of the use of TAS (an earlier version of Odyssey TeleAssess) by practice nurses to sort requests for same day appointments in a UK general practice, Vorster found a significant reduction in the average GP time involved in caring for patients per patient from a mean of 13 minutes in the control group to 7.36 minutes in the triaged group. This resulted in significantly reduced costs per patient in the triaged group compared to the usual care group of £8.70 per patient. Nurse telephone triage reduced the amount of GP time needed for these patients, so allowing the GPs to focus their attention on other activities within the practice (such as meeting QOF targets, providing income generating enhanced services, training, undertaking non-NHS work etc). In addition, the study found that the practice spent about the same amount of time with the patient in total and the cost savings were related to the fact that it was nurse time being used rather than doctor time. Also there was no significant increase in the rate of re-referral, as measured by repeat presentations within 28 days. They were same for doctor appointment and nurse telephone assessment.

Encourages self-care

Members of the public prefer self-care to consulting a health professional for minor illness, and there is a growing body of evidence to support encouraging self care in primary care for both physical and psychological conditions. NHS policies encourage the promotion of a greater reliance on self care, and this can enable patients to feel more empowered and may also support improved communication between healthcare professionals and patients. However, members of the public, whilst keen to perform self care, often require support for their decision making and in a recent survey over three-quarters say that they would have greater confidence to take care of their own health if they had guidance and support from an NHS professional.



Reduces Risk

Nurse telephone triage can expose the practice to considerable medico-legal risk unless the nurse assessing the patient has been adequately prepared for this role, is appropriately supported, and there is detailed documentation of the call content. Odyssey TeleAssess dramatically reduces these risks by ensuring that all patients are assessed in an in-depth way and provided with advice that adheres to best practice, and that the full content of the call is documented through simple mouse-clicks to provide a very detailed record. Odyssey TeleAssess, and its earlier versions TAS and TAS Odyssey, have an enviable record having been used to assess almost 10 million UK patients' needs without a single case of litigation associated with its clinical content.

Prof. J Dale, April 2008

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