Apps in primary care – dawn of the docbot?

Want a GP appointment in the next hour? Don’t have time to leave your desk? Don’t feel like paying for a private service? There’s an app for that.

“GP at hand” is a new remote primary care consultation service launched by private sector technology company Babylon and funded by the NHS. Users download an app to their smartphones into which they enter their symptoms, receive advice, are issued prescriptions, and book phone or video appointments with a GP.

The service requires patients to be de-registered with their local GP practice, which may put many off, but its proponents are confident the new digital offering will become a viable and popular alternative to bricks-and-mortar primary care.

“We’ve benefited from this kind of technology in so many different aspects of our lives, whether that be shopping or banking, and it’s really time that we were able to do that in healthcare for NHS patients,” says Dr Mobasher Butt, Babylon’s medical director.

Babylon says its purpose is “to democratise healthcare by putting an accessible and affordable health service into the hands of every person on earth.” No pressure there then, but the company is not on a purely philanthropic mission. Its commercial ambitions came to the fore and attracted national press attention at last year’s RCGP conference when it handed out fliers claiming that doctors could earn £90,000 a year working for its online service.

They say that “just one in 100 doctors make it through our tough application process,” which suggests long queues of disenchanted NHS GPs snaking round their office desperate to sit in front of a webcam rather than behind a desk. Many are called but, it seems, few are chosen.

But just how safe will patients be after the digitised health revolution has redefined the prescribing process? Will algorithms and flowcharts prove adequate in the face of the complex health needs of many of the patients currently seen in GP surgeries?

Losing contact

On page 40, leading health journalist Danny Buckland takes a look at the realities of digital healthcare and uncovers considerable concerns among clinicians and leaders.

One worry is that all this technical wizardry will see an end to the traditional thrashing out of tricky clinical problems among experienced peers.

“New technology gives us e-learning and remote working... but what we miss out on is that face-to-face contact with colleagues,” says RCGP chair Professor Helen Stokes-Lampard. “The collegiate approach is important; talking through a complex case with a trusted colleague is so powerful.” She adds that while an app or algorithm may be good at assessing physical symptoms, “it can’t usefully consider the much more complex factors of the patient’s social and psychological situation.”

But GPs working at the sharp end of NHS practice need not worry too much about being digitised out of a job at this stage. Babylon’s long list of patients for whom the service “may be less appropriate” include the older population, patients with complex needs and those with mental health problems. Nice work if you can get it, then.

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