

GP Autopilot

Service definition document (G-Cloud 15)

Version: 1.0

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About this document

This service definition describes the GP Autopilot cloud software service. It explains how the service works, who it is for, key features, interoperability, security and data protection, service levels, support, onboarding and exit management.

Pricing and contractual terms and conditions are provided in separate G-Cloud service documents.

1. Service overview

GP Autopilot is a cloud-based automation and AI platform from EyeV Limited that helps general practice teams process incoming clinical documents and administrative workflows more efficiently. The platform is typically used to:

- Reduce manual effort in processing, summarising and clinically coding incoming correspondence (for example hospital letters).
- Support referral workflows (urgent and routine) with structured capture and automated form generation/submission.
- Support patient communications and questionnaire-based workflows (where enabled) to reduce avoidable administrative activity.

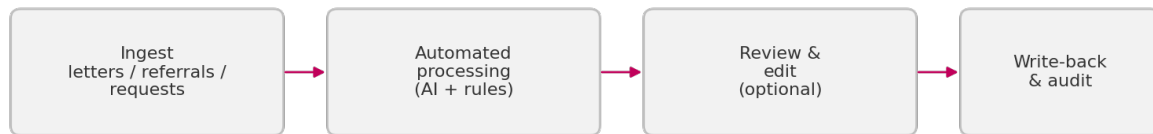
GP Autopilot is delivered as a secure web-based service accessed through standard browsers. No local installation is required.

Typical users

- Practice administrators, secretaries and clinical coders
- Practice managers and operational leads
- Clinicians (GPs, nurses, pharmacists and other clinical roles) reviewing outputs and completing actions

Outcomes supported

- Faster processing of inbound correspondence and improved visibility of work queues.
- More consistent, auditable clinical coding and record updates.
- Reduced administrative burden through automation of repeatable tasks and structured workflows.



2. What the service does

GP Autopilot provides a configurable dashboard and automation layer for processing documents and running workflows. Depending on the modules purchased and enabled, it can ingest letters and other inputs, extract structured information, support user review, and write results back to configured clinical systems.

Core capabilities

- Secure web-based dashboard for work queue management and review.
- Bulk processing and filtering to support high-volume operational workflows.
- Automation and rules to reduce manual re-keying (for example clinical coding and task generation).
- Audit trail for processed items and actions taken.

Modules (may be purchased independently)

- Document Management (AI Letter Coding): AI-assisted processing, summarisation and coding of inbound correspondence.
- Referral Processing: structured capture and end-to-end referral workflow support.
- Online Consultations (where enabled): questionnaire-based digital request capture and automated communications.

The implementation approach (configuration, integrations, and workflow design) is agreed with each customer during onboarding.

3. Features

3.1 Document Management (AI Letter Coding)

The Document Management module is designed to reduce the administrative effort involved in processing inbound correspondence (for example hospital letters), while maintaining clinical oversight.

Ingestion and work queue

- Letters can be ingested via a dedicated email inbox, manual upload, and (where configured) NHS electronic document redirection.
- Upload in bulk or one at a time; track processing status in the dashboard.
- Advanced filtering to help users find letters with specific conditions or other criteria.
- Customisable letter types and workflows to align to local operational models.

AI-assisted extraction and coding

- AI reads clinical letters and returns suggested SNOMED codes, structured diagnoses/procedures and measurements.
- Supports a large catalogue of SNOMED concepts, aligned to the target clinical system (for example SystmOne and EMIS code sets).
- Captures common clinical measurements (for example weight, height, BMI, blood pressure, heart rate, smoking status, alcohol consumption, PHQ-9 and GAD-7 where present).
- Generates a summary of the letter to support quick review.
- Can highlight potential duplicates to reduce re-work.

Review, editing and tasking

- Users can review and, where required, edit codes, measurements and suggested actions prior to filing.
- A letter overlay supports quick editing (for example change codes, update measurements or toggle tasks).
- Configurable tasks can be raised to support onward actions (for example medication changes or action required).
- Where supported by the target clinical system, tasks can be created for users, groups or teams.

Write-back and filing

- Supports filing and write-back into primary care clinical systems (including SystmOne and EMIS) and document management systems (for example Docman) where configured.
- Coded letters can be recorded in the patient record with a summary and a link to the source document.
- Each processed item can be assigned a unique identifier to support audit and traceability.

Service limitations and clinical oversight

- The service supports clinical decision-making but does not remove the need for appropriate clinical review of correspondence.
- Outputs are AI-assisted and GP Autopilot does not guarantee 100% accuracy.
- The letter coding module does not determine which practitioner should review or action an individual letter.

3.2 Referral Processing

The Referral Processing module supports urgent and routine referral workflows, reducing manual administrative steps while maintaining governance and safety controls.

- Structured capture of referral information, supporting attachments and supporting evidence.
- Automated generation of referral forms and submission steps (for example e-RS workflows where configured).
- Workflow tracking and audit trail to support operational oversight and governance.
- Built-in expediting features to help keep pathways compliant and timely.

3.3 Online Consultations and patient questionnaires (optional)

Where enabled, GP Autopilot can support questionnaire-based workflows and automated communications to help practices capture structured information digitally and reduce avoidable re-contact.

- Send structured patient questionnaires and capture responses.
- Automated patient contact options (for example email, SMS and telephone) where configured.
- Automation rules to route requests to appropriate work queues and trigger follow-on actions.

3.4 Reporting and analytics

- Operational dashboards to monitor volumes and throughput (for example documents processed, referrals created and queue status).
- Export options to support local reporting and BI tooling (for example Power BI) where configured.
- APIs may be available for aspects of the platform (subject to module scope and configuration).

4. Integration and interoperability

GP Autopilot is designed to integrate with primary care systems and local configurations to reduce manual re-keying and support end-to-end operational workflows. Integration options depend on the customer's technical environment and the target system capabilities.

Primary care systems

- SystmOne and EMIS integration for write-back of coded correspondence and actions (subject to configuration).
- Compatibility with document management tools such as Docman for document filing workflows (where configured).

NHS and national services (where applicable and permitted)

- Personal Demographics Service (PDS) and NHS Spine integration options where configured and permitted.
- e-Referral Service (e-RS) integration options to support referral submission workflows.
- Secure email ingestion for inbound documents (for example via NHS Mail or Microsoft 365 mail) where configured.

Integration type	Standards / methods	Typical use
Clinical system write-back	Configured interfaces to SystmOne/EMIS; secure document and data write-back	File coded letters, add journal entries, create tasks and support audit trail
APIs (optional)	REST/JSON; OpenAPI; HL7 v2 and/or FHIR-aligned APIs where in scope	Integration with local systems, reporting feeds and workflow orchestration
Messaging / transport	Secure email ingestion; HSCN and/or other secure transport where required	Inbound document ingestion and delivery to configured endpoints
Analytics / BI feeds	Export files and/or data feeds where configured	Operational dashboards and reporting (for example Power BI)

5. Security, data protection and compliance

GP Autopilot is designed for use with sensitive health information and includes controls to support confidentiality, integrity and availability.

Security controls (summary)

- Data storage and processing is performed in the United Kingdom.
- Data in transit is protected using TLS (version 1.2 or above) and/or private network connectivity where required.
- Protection of data at rest includes encryption of physical media and cloud datacentre security controls (provided by hosting providers).

- Routine penetration testing and security assurance activities are performed (for example IT health checks).
- Audit and traceability features support operational governance (for example unique identifiers for processed items).

Information governance

- MHRA Class I medical device registration (as stated on the GP Autopilot website).
- DCB0129 completion with external review (as stated on the GP Autopilot website).
- NHS DTAC completed (as stated on the GP Autopilot website).
- NHS Data Security and Protection Toolkit held to “Standards Exceeded” (as stated on the GP Autopilot website).
- Cyber Essentials Plus certification (as stated on the GP Autopilot website).

Data protection

GP Autopilot processes personal data and special category data (health) to provide its services. Data protection roles and responsibilities (controller/processor) are agreed in the call-off contract and supporting data processing documentation. Template Data Processing Agreements and DPIA materials are available on request.

6. Service levels, availability and resilience

Service levels and support arrangements are agreed with the customer as part of the call-off contract. The following describes the standard service level approach for GP Autopilot.

Service level	Target / description
Platform availability	99.9% service availability (measured per calendar quarter), excluding planned maintenance.
Planned maintenance windows (UK time)	Daily: Tue–Sun 03:00–05:00; Weekly: Sun 18:00–Mon 08:00 (or as notified).
Support hours	Mon–Fri 09:00–17:00 (excluding UK bank holidays and agreed holidays).
Support channels	Support portal / ticketing, email, telephone, and (where agreed) Microsoft Teams.
Incident response targets (examples)	Priority 1: acknowledged within 15 minutes; Priority 2: within 1 working hour; Priority 3: within 8 working hours.

Extended support (optional)	Extended hours and enhanced support models can be agreed where required.
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The platform is monitored and managed by EyeV. Outage communication and incident management processes are agreed during onboarding.

Backup, disaster recovery and business continuity arrangements are available on request and may depend on the customer's integration scope.

7. Onboarding, training and support

EyeV operates a structured implementation and onboarding process. The approach is tailored to the customer's scope (for example single practice deployment, PCN/federation deployment, and which modules are enabled).

Implementation stages (typical)

- Kick-off: confirm scope, stakeholders, governance, and success measures.
- Configuration: confirm workflows (for example letter types, queues, actions/tasks and referral templates) and local protocols.
- Integration (where required): agree interfaces, mapping and testing approach for clinical system write-back and other endpoints.
- Testing: user acceptance testing and operational readiness checks.
- Go-live: phased rollout and hypercare support.
- Continuous improvement: regular service reviews, workflow optimisation and release management.

Training

Training can be provided remotely (for example video sessions) and is tailored for clinical, administrative and super-user roles. The supplier also provides written documentation and video tutorials, and can support face-to-face training where agreed.

Support

Support is available via the support portal, email or telephone during support hours. Incident prioritisation and response targets are managed in line with the agreed support model.

8. Technical requirements and service constraints

GP Autopilot is delivered as a cloud software service accessed through modern web browsers. Local deployment is not required.

System requirements (typical)

- Supported browsers: current versions of Microsoft Edge, Google Chrome and Mozilla Firefox.
- Internet connectivity suitable for secure web applications; HSCN connectivity where required for specific integrations.
- Email environment where email ingestion is used (for example Microsoft 365 mail or NHS Mail).
- Primary care clinical system integration where write-back is in scope (SystemOne and/or EMIS).

Service constraints and limitations

- GP Autopilot is an assistive tool and does not remove the need for appropriate clinical review.
- AI-assisted outputs may require user review and amendment prior to filing, depending on local governance requirements.
- The letter coding module does not guarantee 100% accuracy and does not determine which practitioner should review an individual letter.

Module-specific constraints and any local governance requirements are agreed during implementation.

9. Accessibility

The GP Autopilot web interface is designed to be usable across devices and supports common accessibility features (for example keyboard navigation and screen zoom). Where customers have specific accessibility requirements, an assurance and improvement plan can be agreed during implementation.

10. Exit management and key contacts

Exit and offboarding

On contract end, EyeV supports data export and transition planning. Users can be provided with exports in common formats (for example CSV/JSON/SQL extracts and document bundles) and/or via agreed interfaces (including APIs where enabled). Secure deletion is performed in line with agreed retention requirements and contractual obligations.

Purpose	Contact
General enquiries and onboarding	hello@eyev.health
Support desk	gpautopilot.support@eyev.health

Telephone	+44 (0)115 650 0102
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This service definition intentionally excludes pricing and contractual terms and conditions. Separate documents are provided as part of the G-Cloud service documentation.