

EYEV: Autotriage

Service definition document (G-Cloud 15)

Version:	1.0
Date:	2026-01-29
Contact:	hello@eyev.health

About this document

This service definition describes the EYEV: Autotriage cloud software service. It explains how the service works, who it is for, key features, service levels, support, onboarding, security and interoperability. Pricing and Terms & Conditions are provided in separate documents.

1. Service overview

EYEV: Autotriage is a clinically governed digital decision-support service that supports the safe, consistent and efficient triage of healthcare referrals within NHS referral management and Single Point of Access (SPOA) workflows. The service is specialty-agnostic and is currently configured for ophthalmology pathways, with the ability to extend to additional clinical specialties by agreement with commissioners and provider organisations.

The service ingests referral information from multiple sources (structured forms, documents and free text) and applies structured clinical logic to support prioritisation, routing and escalation decisions aligned to locally approved pathways. The service operates as clinical decision support only; final responsibility for triage decisions remains with the appropriately trained clinician or service.

Typical users

- Clinicians performing referral triage in provider organisations and Single Point of Access services
- Administrative and operational teams supporting referral management and SPOA workflows
- Service managers and commissioners (governance, pathway oversight, demand and performance insight)

- Digital and information governance teams (integration and assurance activities)

Outcomes supported

- More consistent prioritisation and routing decisions aligned to locally approved pathways
- Improved referral quality through structured extraction of key clinical features and risk indicators
- Earlier identification of safety-critical and time-sensitive presentations requiring escalation or review
- Transparent and auditable outputs to support clinical governance, assurance and service evaluation

How the service works (high level)

1. Referral received into the Autotriage workflow (via configured integration routes or secure upload).
2. Clinical feature extraction identifies symptoms, findings, risk factors and red-flag indicators relevant to the configured pathway.
3. Structured clinical logic is applied to support urgency categorisation (for example routine, urgent, emergency) and routing to the appropriate service or subspecialty.
4. Safety-critical features are highlighted for review and escalation where required.
5. The clinician reviews the decision-support output and records the final triage outcome in line with local governance arrangements.

2. What the service does

EYEV: Autotriage supports clinicians by analysing structured and free-text referral information to identify relevant clinical features and risk indicators and to support prioritisation, routing and escalation decisions. The service produces consistent, auditable decision-support outputs aligned to locally approved pathways.

The service supports clinicians by:

- Analysing structured and free-text referral information
- Identifying relevant clinical features and risk indicators
- Supporting referral prioritisation (for example routine, urgent or emergency)
- Supporting routing to the appropriate clinical service or subspecialty
- Highlighting safety-critical features requiring escalation or review
- Producing consistent, auditable decision-support outputs aligned to local pathways

Core capabilities

Referral ingestion

- Supports ingestion of referrals from multiple sources, including structured forms, documents and free text.

Clinical feature extraction

- Identifies symptoms, findings, risk factors and red-flag indicators relevant to the configured clinical pathway.

Priority decision support

- Applies structured clinical rules to support referral urgency classification.

Routing and pathway support

- Supports routing to the appropriate service, clinic or subspecialty based on local configuration.

Safety escalation logic

- Flags potentially time-critical or high-risk presentations for urgent attention or review.

Configurable deployment

- Pathways, rules and outputs are configurable to align with commissioner-approved service models.

Audit and traceability

- Structured outputs are retained to support audit, assurance and clinical governance.

Optional modules

- Enhanced referral quality support: tools to support improved referral completeness, clarity and alignment with local pathways.
- Consistency and confidence indicators: supplementary indicators to support clinical review, quality assurance and governance oversight.
- Analytics and service insight: aggregated reporting to support demand management, pathway optimisation and service planning.
- Training and evaluation mode: deployment in non-clinical or educational settings for testing, training or service evaluation.
- Additional specialty configurations: extension of the Autotriage capability to additional clinical specialties by agreement.
- Referral feedback and learning tools: structured feedback and aggregated insights to support continuous improvement in referral quality.
- Local policy and configuration management: tools to support local pathway configuration, version control and governance oversight.
- Audit and exception review support: features to support audit sampling, review of flagged cases and clinical assurance processes.

- Capacity and demand insight: aggregated visibility of referral volumes and pathway pressures to support operational planning.

3. Features

EYEV: Autotriage is designed to support consistent, safe and scalable referral triage within NHS services while preserving clinical oversight. Transparent and auditable outputs support clinical governance and assurance, while the specialty-agnostic architecture enables scaling across services and specialties without re-procurement.

Key features include:

- Specialty-agnostic Autotriage capability
- Designed for SPOA and provider triage workflows
- Clinician-in-the-loop by design
- Supports both structured and unstructured referral data
- Local pathway and policy alignment
- Transparent and auditable outputs
- Configurable escalation and review thresholds
- Scalable across services and specialties
- Designed to support consistency without removing clinical judgement

4. Benefits

EYEV: Autotriage supports more consistent and timely management of referral demand by applying structured decision support within existing NHS workflows. It helps reduce unwarranted variation, improve referral quality and support timely access to care.

- Supports consistent and safe triage decisions across referral pathways
- Reduces unwarranted variation in prioritisation and routing decisions
- Improves referral quality and completeness, reducing avoidable follow-up
- Supports earlier identification of safety-critical and time-sensitive cases
- Enhances patient flow through clearer prioritisation and routing
- Reduces administrative and clinical rework associated with incomplete or mis-routed referrals
- Supports more efficient use of clinical and administrative resource
- Helps optimise service capacity by directing referrals to the most appropriate pathway first time
- Provides transparent, auditable outputs to support clinical governance and assurance
- Scales across specialties and services without requiring re-procurement
- Configurable to local pathways, policies and commissioning requirements

5. Integration and interoperability

The service is designed to integrate with NHS digital environments and supports interoperability across referral, clinical and operational systems. Integration approaches are agreed during onboarding with local digital, information governance and clinical teams to ensure alignment with local architecture, data flows and governance requirements.

Integration options include:

- NHS e-Referral Service (e-RS), where locally configured
- GP clinical systems, including EMIS and SystmOne
- Hospital Patient Administration Systems (PAS), where locally enabled, to support downstream booking and pathway management
- Secure document ingestion, including PDF referrals and structured forms
- API-based integration to support local system architectures
- Support for interoperability standards, including HL7 and FHIR, where appropriate

6. Security, data protection and compliance

EYEV: Autotriage is designed to meet NHS and UK public-sector governance requirements. Controls are implemented to support confidentiality, integrity and availability of information.

- UK GDPR and Data Protection Act 2018 compliance
- NHS Data Security and Protection Toolkit (DSPT)
- Alignment with DTAC requirements
- Clinical safety management aligned to DCB0129 (supplier responsibilities). Customer clinical safety responsibilities (for example DCB0160) are supported through implementation documentation and governance materials.
- Role-based access control
- Secure hosting within accredited UK environments
- Comprehensive audit logging and access monitoring

7. Service levels, availability and resilience

The service is designed for high availability and operational resilience, supported by resilient infrastructure, continuous monitoring and proactive incident management. Planned maintenance is scheduled and communicated in advance where possible.

Standard service availability target:

- 99.5% uptime, excluding planned maintenance.

Additional service commitments include:

- Continuous infrastructure monitoring

- Incident management aligned to NHS operational expectations
- Planned maintenance communicated in advance
- Business continuity and disaster recovery arrangements

Service levels, support hours and response targets may be tailored by agreement depending on deployment scale and criticality.

8. Onboarding, training and support

EYEV provides structured onboarding and ongoing support to ensure the service is implemented safely and effectively within local pathways. This includes implementation planning, pathway configuration, integration support (where in scope), and training for clinical and administrative users.

Implementation stages (typical)

- Kick-off: confirm scope, stakeholders, governance and success measures.
- Pathway configuration: configure pathways, rules, outputs and escalation thresholds aligned to locally approved models.
- Integration (optional): agree interfaces, mapping and testing approach (where integration is in scope).
- Testing and assurance: user acceptance testing and operational readiness checks; support clinical safety governance activities.
- Go-live: phased rollout and hypercare support.
- Continuous improvement: support pathway updates, reporting needs and service evolution over time.

Training and support

- Training for clinical and administrative users (virtual and/or on-site by agreement)
- Provision of governance and assurance documentation to support local approvals
- Ongoing service support via agreed support channels
- Support for pathway change and service evolution

9. Technical requirements and service constraints

EYEV: Autotriage is delivered as a cloud software service accessed through modern web browsers. Local deployment is not required.

Typical technical requirements

- Supported browsers: latest versions of Chrome, Edge, Safari and Firefox (and supported mobile equivalents).
- Internet connectivity suitable for secure web applications; HSCN connectivity where required for specific integrations.

- Customer-provided user list and role mapping for onboarding (or customer identity provider integration for single sign-on where configured).

Service constraints and responsibilities

- The service operates as clinical decision support only and does not make autonomous clinical decisions.
- Final responsibility for triage outcomes remains with the appropriately trained clinician or service.
- Outputs depend on the quality and completeness of the referral information provided and the local pathway configuration.
- Local pathway configuration, governance approvals and change control are agreed during onboarding and ongoing service management.

Accessibility

The service 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

On contract end, EYEV supports data export and transition planning. Data can be provided in common formats (for example CSV extracts and document bundles) and/or via agreed interfaces. Secure deletion is performed in line with agreed retention requirements.

Key contacts

General enquiries and onboarding: hello@eyev.health

Support desk: support@eyev.health (or as provided during onboarding)

This document intentionally excludes pricing and Terms & Conditions. Separate documents are provided as part of the G-Cloud service documents.