# First contact practioners



## Meet the speakers



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## Learning outcomes

- 1. Understand what a first contact practioner is
- 2. What can first contact practioners bring to primary care consultation
- 3. Understanding the practicalties





## What is a first contact practioner?

 An autonomous, advanced practitioner, able to see patients with MSK conditions instead of the GP.

- They are able to assess, diagnose, investigate and manage the care of patients from the beginning of their MSK journey.
- Using FCPs reduces GP workloads and improves patients' pathways of care.

## Why do we need this change?



34% of GPs will retire in the next 5 years

Applications for GP training are reducing....

....there aren't enough GPs

## What's the difference between...



A physiotherapist



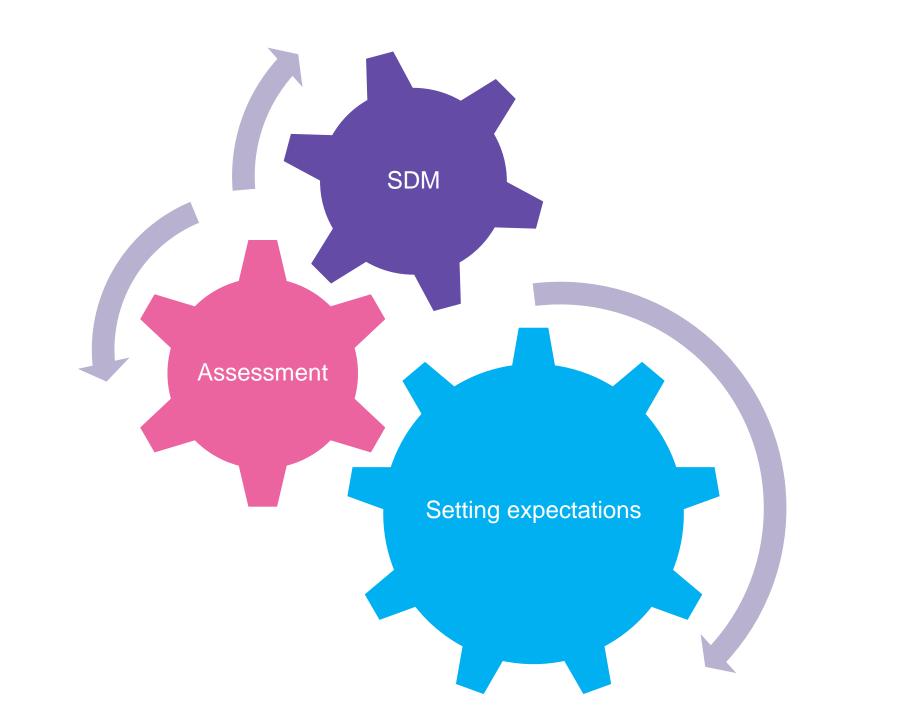
Advanced Practice Physiotherapist



First contact practitioner physiotherapist

## What are the advantages?

- Early access to advanced MSK skills
- Freeing up GP time (How to use it?)
- Reducing costs
- Improving pathways
- High levels of Patient and GP satisfaction



### What can we do?

- Specialist MSK assessment and identify red flags
- Request and interpret diagnostics
- Diagnose and formulate a management plan with the patient
- Issue Advisory Fit notes
- Social prescribing

## What are the challenges?

- Aligning with local MSK Pathways
- Sustainable funding
- Finding Advanced Practice Physiotherapists
- De-skilling GPs?
- Coherent IT systems

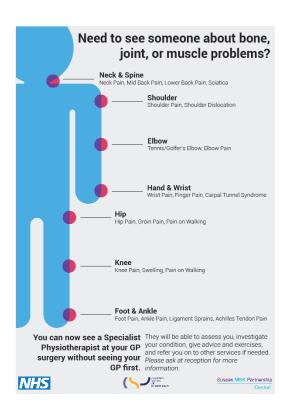
	ADVANTAGES	CHALLENGES
FCP Band 7	<ul> <li>Expert MSK Knowledge</li> <li>Knowledge of local pathways and CECs</li> <li>Can refer directly into eg ESCAPE pain, back class</li> </ul>	<ul> <li>Unable to independently request bloods, x-rays, scans</li> <li>Not independent prescribers</li> <li>Unable to do intraarticular injections</li> <li>More supervision required</li> <li>Higher rate of referral</li> </ul>
FCP Band 8A	<ul> <li>Advanced shared decision making skills</li> <li>Able to independently request &amp; interpret bloods / x-rays* /scans</li> <li>Often independent prescribers</li> <li>Often able to do joint injections</li> </ul>	<ul> <li>Limit in the number of clinicians available</li> <li>More expensive – or actually less expensive if less referrals required and less GP intervention.</li> </ul>

### The practicalities

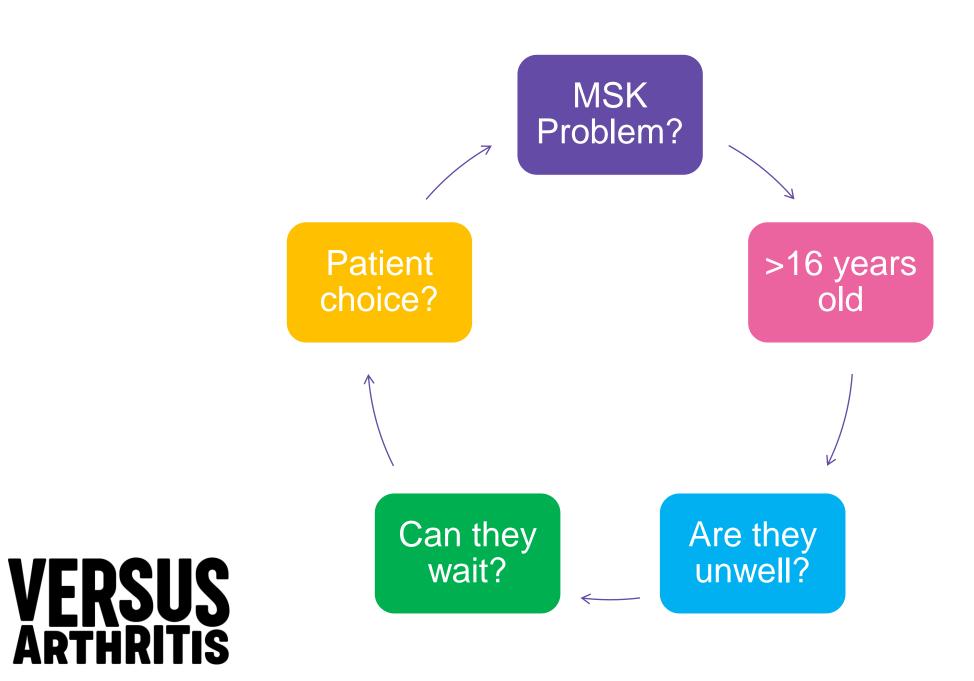
- Marketing the concept to your patients
- Training Care Navigators
- Introducing the FCP to the team
- Setting up protocols
- Room, plinth, reflex hammer....
- Setting up templates
- Establishing governance

### **Assuring success:**

- Engagement and training of non clinical staff
- Integration of the FCP into primary care team
- Involvement of PPGs
- Alignment with local MSK Pathways







#### **Feedback**

#### **GP**

"FCPs have been a terrific addition to our team. Not only do they take the workload of seeing MSK problems but they do it better than we do and teach us how to improve our own assessments."

"FCPs are a rarity, the promise has been excelled by the experience. They have revolutionised the way we manage our musculoskeletal problems."

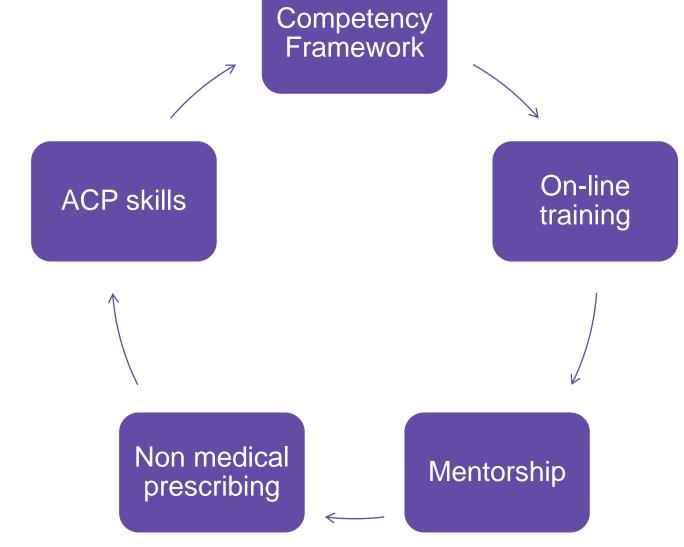
#### First contact practioner

"You're not just getting a physio, you're getting an MSK specialist who can encourage physical activity and self-management but also refer quickly for imaging and surgery if necessary"

"We focus on the patient who is at the centre of our care... it is essential we work in collaboration with the GPs"

"It's like physio speed dating!"

### **Training for FCPs**



#### An overview of the evidence

#### Downie et al

- 2 year pilot in 2 practices
- Band 8 physios
- 20 min appointment
  - 87.3% managed within primary care
    - 12% needed prescription
- 1% review with GP
- Reduced referral to orthopaedics
- Increased referral to physiotherapy

#### Martini, 2017

- Band 6 physios30 min
  - 30 min appointments
  - 44% d/c
  - 27% physio
- 1% secondary care
- 8% needed further medical care (imaging etc)
- High satisfaction rate

#### **Morley, 2018**

- Band 8 physios
- 59% received self management advice
  - 23% got advice about medication
- 16% referred to physio
  - 3% went for imaging
- High satisfaction rate

#### Salmon, 2017

- Band 8 physios
- 40% reduction in orthopaedic referrals
- 97% managed within FCP
- High satisfaction rate

#### Sussex MSK

#### **Feedback**

- 87% of people managed at first contact
- Less referrals back to the GP
- Less onward referral to secondary care
- Lesser proportion referred on to physiotherapy

98% of patients felt involved in decisions about their care

83% of people had enough information about the service

100% of patients would recommend this service to family and/or friends

Average satisfaction score (out of 10) was 9.8

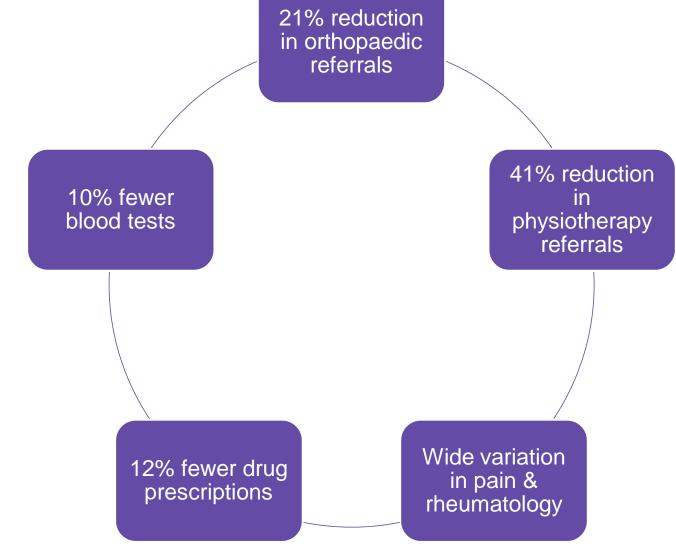
Thought it was brilliant

Invaluable service especially as a follow up to injury

Good service to have via the surgery – I do hope it is retained

**National Evaluation** 

FCP activity compared to GP activity



## Thank you...

**Questions?** 

