Physiotherapists as an alternative to GP for NHS musculoskeletal conditions in primary care



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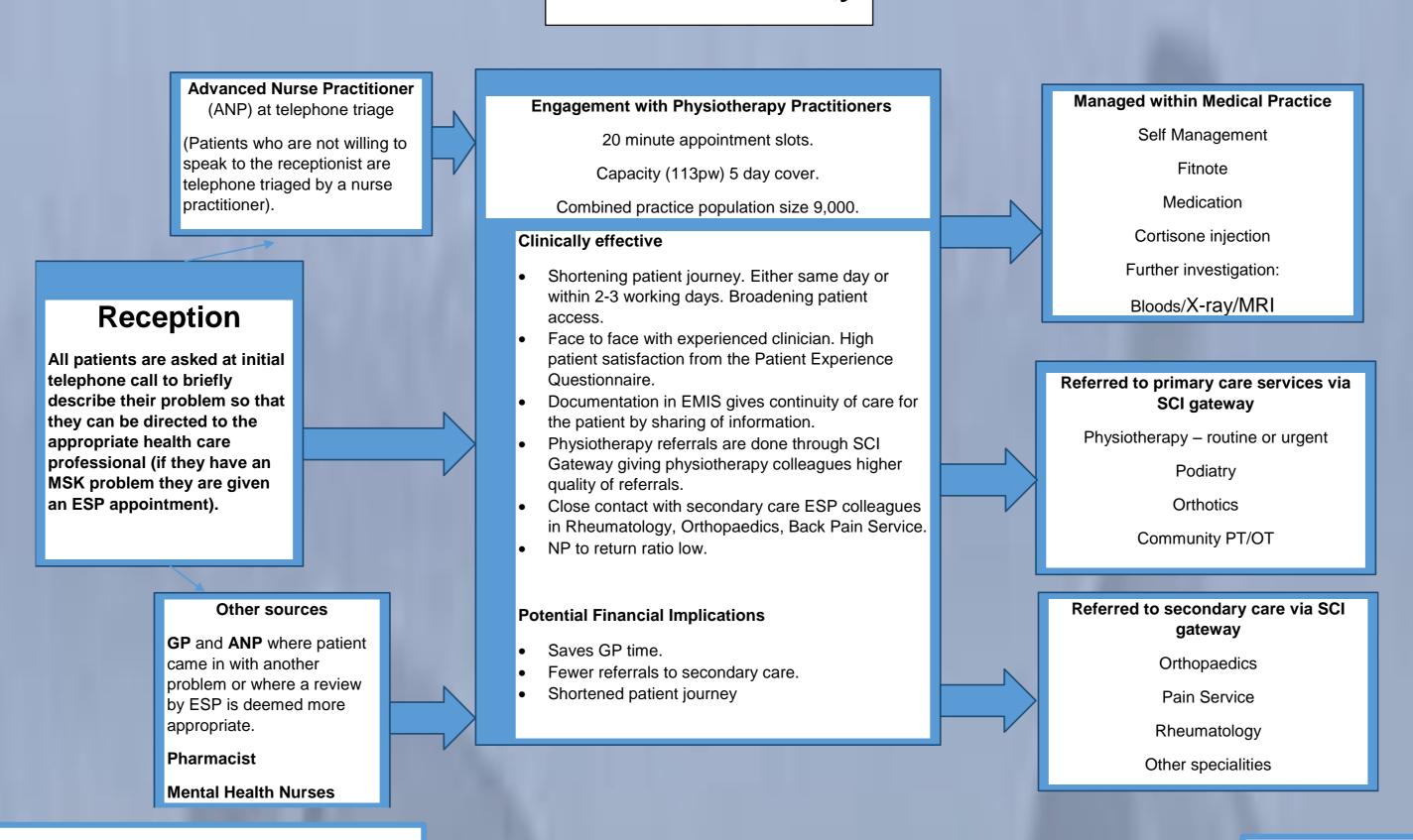
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Background

In November 2015 1.2wte Extended Scope Practitioners (ESPs) were introduced at Kersiebank and Bannockburn Medical Practices as part of a service re-design in response to GP shortages. These roles were implemented by advanced physiotherapists acting as first point of contact practitioners for people with musculoskeletal disorders. ESPs can diagnose, give specialist advice, refer for further investigations, provide steroid injections, and can refer to other services for example rheumatology, orthopaedics or physiotherapy.

On introduction, these first contact roles were innovative within Scotland but have since been widely adopted. However, there has been little research conducted evaluating the effect and impact of these roles to date.

MSK Patient Journey



Aims

- This enhanced physiotherapy role in primary care aims to free up GP time and provide a more cost-effective and financially sustainable service
- Gather service users experiences
- Evaluate impact of this role on GP workload
- Improve the patient journey by providing clinical expertise in a primary care setting, avoiding onward referral to secondary care where possible e.g. reduce orthopaedic referral rates and increase conversion to surgery rates
- Publish and share findings when appropriate

Methods

- Data from the first 2 years of the service was collected and evaluated
- Patient experience surveys were completed and evaluated
- Referral rates to physiotherapy and orthopaedics were analysed before and after the introduction of the service

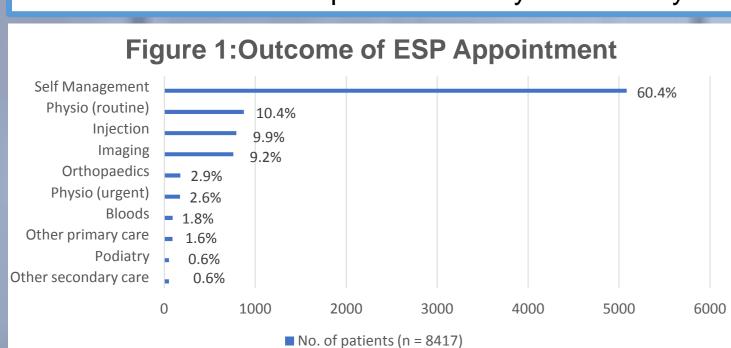
Results

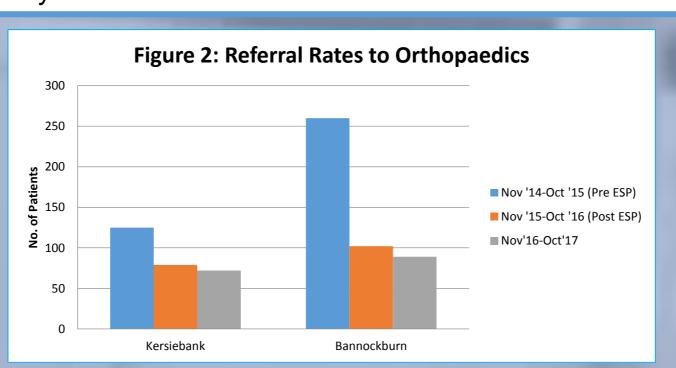
8417 patients were seen with 60.4% of these self-managing and 87.3% being managed entirely within the health centre setting whilst 13% required referral to secondary care services (imaging 9%, orthopaedics 3%, other 0.6%) (Figure 1). Only 1% of patients required GP review.

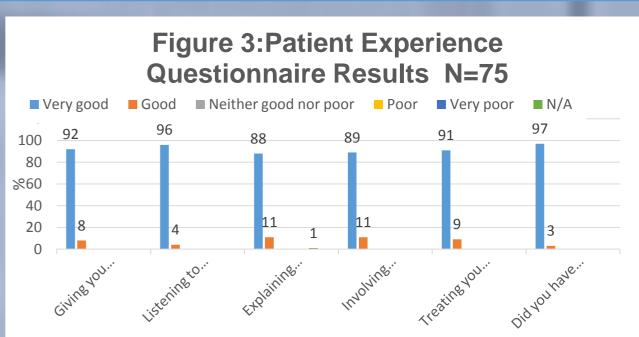
for primary care

Orthopaedic referral rates were reduced in both practices by approximately 212 referrals per year in total (Figure 2). 86% of ESP referral to orthopaedics were deemed appropriate.

97% of patients surveyed said they definitely had confidence and trust in the ESP and 3% said yes, to some extent (Figure 3).







Conclusions/Implications

- Results support that ESPs can effectively and independently manage MSK patients in primary care. This not only saves GP time but also simplifies patient journeys and is likely to have financial implications
- Orthopaedic referral rates have been substantially reduced in both practices and initial results show a high conversion to surgery rate by ESPs
- Patients report high satisfaction with the service
- This service requires minimal GP support
- Considering current drivers affecting today's NHS such conclusions have clear implications for the provision of these roles across the UK, enhancing the composition of multidisciplinary primary care teams to improve patient care
- These findings have been submitted to a peer reviewed journal and are awaiting publication