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Dr Dai Lloyd AM  
Chair of the Health, Social Care and Sport Committee  
National Assembly for Wales  
Cardiff Bay  
Cardiff CF99 1NA

Tuesday 5<sup>th</sup> of December 2017

Dear Chair and Committee Members

**Inquiry into Primary Care: Clusters – Response from the Chartered Society of Physiotherapy**

The Chartered Society of Physiotherapy (CSP) is writing to you to highlight a concern in relation to something that has been included within your recent publication.

On page 25, Section 73 it is noted that ‘both the Chartered Society of Physiotherapy and DPCMH report that musculoskeletal (MSK) services within cluster teams are resulting in reductions in GP consultation for MSK conditions.’ This was referenced to written evidence PC08 from the CSP that was evidence based.

The next sentence says, ‘However, whilst many of the clusters have invested in additional physiotherapy services, there was limited hard evidence to prove that this has directly reduced pressures on GPs’. This sentence has not been attributed to any written oral evidence specifically so it is not clear on what the conclusion is based.

The CSP is very disappointed in the inference given by the report on the use of MSK services within Clusters. Whilst it is still early days, there is a gathering body of evidence from pilots, vanguards and services that are being ‘scaled up’ across geographical areas in the UK demonstrating that time is being saved for GPs where they employ physiotherapists to manage MSK in General Practice.

There are a variety of different models available using First Contact Physiotherapy (FCP), physiotherapy MSK triage and patient direct access/self-referral. All divert patients away from the GP. The time of the GP is therefore ‘freed up’ to see other patients.

Both the BMA Cymru Wales and the Royal College of General Practitioners Wales support the use of physiotherapy and see the benefits that this profession can bring to General Practice. Both have supported the CSP in the development of Guidance, 'General Practice Physiotherapy posts – A guide for implementation and evaluation' <http://www.csp.org.uk/publications/implementing-physiotherapy-services-general-practice-guide-implementation-evaluation>

At the recent Primary Care Summit in Swansea in November a GP from Neath described the telephone triage model which includes physiotherapy MSK triage as part of the model. She reported that using this model has "restored work life balance for the GPs in the cluster". The same GP provided feedback to the CSP as part of the profession's 'Think Physio for Primary Care' publication <http://www.csp.org.uk/professional-union/practice/primary-care/physiotherapy-primary-care-summary-briefing> saying,

*"Over the last 18 months we have diverted all MSK queries to a diagnostic physio. This has saved hours of GP time and gives the patient a better, more informed service. It has been met with warm approval from patients and GPs alike. Our aim is to expand this service with further additions to the physio team. I don't believe primary care is sustainable without such investment in valued para-medical clinicians"*

The CSP is pleased to provide some further examples of impact from around the UK

#### **1. Betsi Cadwaladr University Health Board**

- What started in January 2015 as a pilot with one FCP serving four GP surgeries has developed so that 14 full-time equivalent practitioners now cover 66 primary care practices
- So far the service has seen nearly 21,000 patients
- 38% of patients attending the GP have been seen as a first point of contact by a FCP and only 8% needed another appointment with physio
- Almost 3,000 referrals to secondary care have been avoided, saving the NHS £373,000
- Patients are seen quicker – typically within a week or two, against a wait of three weeks to see their local doctor or 12 weeks for a hospital appointment.

#### **2. Cheshire and Wirral Partnership NHS Foundation Trust and the Countess of Chester Hospital Foundation Trust**

- Services to 36 GP surgeries in West Cheshire
- Physiotherapists see around 1,000 patients/month – a quarter of the GP's caseload
- Less than 3% are referred back to their GP (for a medication review, a fit note or a non MSK condition)
- Over 60% can be discharged after one appointment

The service has:

- Saved GP locum time – 84% of patients seen by the physiotherapist would have been seen by the GP – value £540k/year
- Decreased plain x-ray referrals by 5.9% - value £28k/year
- Decreased MRI referrals by 4.9% - value £83k/year
- Decreased referrals to orthopods by 2% - value £70k/year
- Reduced referrals to physiotherapy services by 3%
- High patient satisfaction – 99% rated this service good or excellent, 97% had their issues addressed
- High GP satisfaction – 91% rated the service as being 8 or over for how beneficial they felt the service is to their practice with 45% scoring 10 out of 10.

### **3. Darlington GP MSK Pilot**

- 1,128 GP appointments were saved and a subsequent reduction in follow-up appointments
- 2 nominated GP practices
- FCP physiotherapist available two hours/day
- 20-minute appointments
- 1,147 patients seen (up to the end of September 2016) and only 19 (2%) required reference back to their GP
- Of the patients seen 849 (74%) were managed with early advice and did not need on-going treatment.

### **4. Cumbria**

- Direct access to a specialist MSK physiotherapist
- Pilot saved nearly 600 GP appointments and cost savings from reduction in investigations such as MRI
- 19% fewer patients were referred to secondary care
- Band 8a, 20 minutes allocated for treatment/assessment
- 11-month service audit
- 79% of referrals seen by MSK practitioner would have normally seen the GP – releasing 561 appointments
- 62% of patients presenting with MSK were managed and discharged from the MSK service
- 27% were referred on for physiotherapy
- 19% fewer patients were referred on to secondary care
- Injection therapy has brought a financial reward to the practice as well as keeping them out of secondary care. NB enhanced payment for injection therapy
- The MSK practitioner has reduced the referral rate to secondary care by 20% with a 90% conversion rate to surgery of those referred by the MSK practitioner.

### **5. Primary Care in Forth Valley, Scotland**

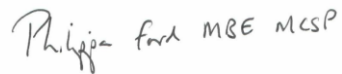
- An 18-month pilot
- Standard GP appointments have risen from 10 to 15 minutes
- 2 physiotherapists with advanced practice skills were employed by Forth Valley NHS to work part-time at Bannockburn medical practice in Stirling and the medical practice in Grangemouth
- The physiotherapists have taken on the GP MSK caseload, deciding on the best pathway for each patient
- They provide advice, support and self-management, show exercises and administer injections and where necessary order investigations (bloods, imaging) plus they refer to orthopaedics, pain and rheumatology clinics
- 97% of patients report confidence and trust in the physiotherapists
- 75% of patients are able to self-manage their MSK conditions
- Referrals to orthopaedics are down to 2%
- Referrals to imaging are down to 6%
- 98.5% of appointments with physiotherapists are appropriate.

The CSP hopes the committee finds these examples useful and our continued evidence of the value of employing physiotherapists within Clusters to support GPs and the rest of the primary care team. MSK health issues are the most common cause of repeat GP appointments and account for 1 in 5 of all GP appointments <http://www.csp.org.uk/professional-union/practice/primary-care/physiotherapy-primary-care-summary-briefing>.

We are unsure if the committee is able to make a change to the published document but we do hope that clarification can be given. Whilst the workload of GPs may not have decreased due to the relentless demand on their time and skills, the CSP asserts that the 'case mix' of patients they are seeing will have changed due to the people with MSK conditions being seen successfully by the physiotherapists working in and/or supporting General Practice.

I look forward to meeting with the committee in the New Year ahead of the debate on this important committee inquiry publication.

Yours sincerely



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CSP Public Affairs & Policy Manager for Wales

