

## First contact physiotherapists

### Overview

First contact physiotherapists | NHS England

The vast majority of musculoskeletal first contact practitioners are physiotherapists with enhanced skills. They can help patients with musculoskeletal issues such as back, neck and joint pain by:

- assessing and diagnosing issues
- giving expert advice on how best to manage their conditions
- referring them onto specialist services if necessary.

Patients with back and joint pain, including conditions such as arthritis, will now be able to contact their local physiotherapist directly, rather than waiting to see a GP or being referred to hospital. Patients can also see a physiotherapist by speaking to the GP practice receptionist or by being referred by their GP.

By making it easier for patients to access physiotherapist, patients will have quicker access to diagnosis and treatment, helping them to manage their conditions more effectively and recover faster, so they can get back to normal life quickly. They will help GPs to manage their workload more effectively, and reduce the need for onward referrals.

Further detail: [First contact physiotherapists](#)

### Reports

National Evaluation of First Contact Practitioner (FCP) model of primary care. Patient characteristics, outcomes and qualitative evaluation | 2021

In the UK, musculoskeletal (MSK) problems are predominantly managed in primary care where they account for approximately 14% of General Practitioner (GP) consultations. Managing these presentations occurs within the wider context of rising workload (in English practices) and difficulties maintaining the GP workforce. To streamline care for patients with MSK problems and to increase capacity within, and to improve access to primary care, the First Contact Practitioner role has been introduced.

Phase 3 of the National Evaluation, undertaken by Keele University and University of Nottingham, was funded and supported by the Chartered Society of Physiotherapy Charitable Trust (CSP-CT) and the Joint Work and Health Unit. This phase consisted of a mixed-methods evaluation of the FCP model of care. Data on patient reported experience and outcomes were collected using an on-line platform. Qualitative data on FCP, GP, general practice non-clinical staff and patient experience was gathered through interviews and focus groups.

This report presents and discusses the findings of this Phase 3 of the FCP national evaluation. It provides useful data on the patients who are accessing these services, their short-term clinical outcomes and whether key success criteria are being met. Recommendations for the scalability and successful implementation of the FCP model of care are provided.

The results confirm that key success criteria are being met. Further work is needed to explore barriers to FCPs providing work advice, to reach agreement on the most appropriate FCP access model to optimise patient experiences and outcomes and to determine whether the FCP model is effective at reducing the workload of GPs.

Full evaluation report: [National Evaluation of First Contact Practitioner \(FCP\) model of primary care. Patient characteristics, outcomes and qualitative evaluation](#)

The following journal articles relate to the above evaluation report:

Stynes S. et al. [Evaluation of the First Contact Physiotherapy \(FCP\) model of primary care: patient characteristics and outcomes](#). Physiotherapy. 2021 Dec; 113: p199-208.

Wood L. et al. [Patient satisfaction with the first contact physiotherapy service: Results from the national evaluation survey](#). Musculoskeletal Care. 2022 20(2): 363-370.

Goodwin R. et al. [Evaluation of the First Contact Physiotherapy \(FCP\) model of primary care: a qualitative insight](#). Physiotherapy. 2021 Dec; 113: p209-216.

## Journal articles

Mercer, C. & Hensman-Crook, A. | First Contact Practitioners- new opportunities for musculoskeletal expertise in Primary Care | Musculoskeletal Science & Practice | Volume 62, 102623, December 2022.

The First Contact Practitioner (FCP) is a relatively new role in the National Health Service (NHS) in England. The role developed as a result of challenges faced by primary care services, and a recognition that AHPs and specifically physiotherapists were well placed to support the existing primary care workforce. This was particularly true for musculoskeletal (MSK) conditions, which account for up to 30% of a GPs workload.

Physiotherapists with MSK expertise and additional advanced practice skills could provide specialist MSK skills at the front end of the patient pathway, whilst also supporting primary care colleagues from a workforce and workload perspective.

Using advanced clinical reasoning skills with knowledge of multi-morbidities and advanced skills such as injection therapies, diagnostic requests and independent prescribing, the FCP role is designed to improve patient experience and promote self-care at the front end of the pathway, using a personalised care and shared decision making approach. The additional benefits include cost savings across the patient pathway and a reduction in the GP work-load.

The benefits range across process benefits and outcome benefits-some of these are listed below:

- Rapid access for patients to expert MSK help
- GP time/appointments saved
- Low DNA (did not attend) rates compared to usual GP appointments
- High patient satisfaction

- High GP satisfaction
- High numbers of patients managed solely by FCP (80%)
- Lower onward referral rates to physiotherapy and secondary care
- Lower numbers of investigations requested (imaging and blood tests)

Full paper: [First Contact Practitioners- new opportunities for musculoskeletal expertise in Primary Care](#)

Morris, L., et al. | Patient acceptability of the physiotherapy first contact practitioner role in primary care: A realist informed qualitative study | Musculoskeletal Care, 2021. Vol.19: 38-51.

Approximately 30% of general practitioner (GP) consultations are due to musculoskeletal disorders (MSKDs). Physiotherapists are trained to assess, diagnose and treat MSKDs and provide an alternative to GP consultation for primary care patients as first contact physiotherapists (FCPs).

This paper explores patient perceived acceptability of the FCP role using realist methods to understand what works for whom, how, why and in what circumstances.

The evaluation highlighted that acceptability of the FCP role was influenced by 'expectations', 'accessibility' and 'promoting the role'. Patients were predominantly accepting of FCPs, nevertheless, there was a scope to increase acceptability through an implementation strategy that considered the contexts of the individual patient, as well as wider practice contexts.

Full paper: [Patient acceptability of the physiotherapy first contact practitioner role in primary care: A realist informed qualitative study](#)

Doran, A. | Implementation of a first contact physiotherapy service within GP practices in North East Wales. A four-year evaluation | Physiotherapy Volume: 113 Issue S1 (2021)

The first contact physiotherapy service (FCP) in North East Wales was established in 2015. Since its inception, it has been through periods of rapid growth and retraction and now maintains a consistent service across 33 GP practices. Many lessons have been learned which may be of use to new FCP services becoming established.

Full abstract: [Implementation of a first contact physiotherapy service within GP practices in North East Wales. A four-year evaluation](#)

Full paper available on request at [andrew.carrick1@nhs.net](mailto:andrew.carrick1@nhs.net)

Downie, F. et al. | Physiotherapist as an alternative to a GP for musculoskeletal conditions: a 2-year service evaluation of UK primary care data | British Journal of General Practice 2019; 69 (682): e314-e320

Physiotherapists are currently working in primary care as first contact practitioners (FCP), assessing and managing patients with musculoskeletal conditions instead of GPs. There are no published data on these types of services. This paper presents an evaluation of a new service presenting the first 2 years of data.

The results suggest that patients with musculoskeletal conditions may be assessed and managed independently and effectively by physiotherapists instead of GPs. This has the potential to significantly reduce workload for GPs as the service requires minimal GP support. The majority of patients were managed within primary care, with low referral rates and highly appropriate referrals to orthopaedics. Patients reported positive views regarding the service.

Full paper: [Physiotherapist as an alternative to a GP for musculoskeletal conditions: a 2-year service evaluation of UK primary care data](#)

Goodwin R.W, & Hendrick P.A. | Physiotherapy as a first point of contact in general practice: a solution to a growing problem? Primary Health Care Research & Development | 2016 Sep; 17(5): p.489-502

There is a growing demand on general practice resources. A novel '1st Line Physiotherapy Service' was evaluated in two GP practices (inner city practice, university practice). Physiotherapy, as a first point of contact, was provided as an alternative to GP care for patients with musculoskeletal complaints.

The aim of this paper was to evaluate the clinical effectiveness, patient satisfaction and economic efficacy of a physiotherapy service providing musculoskeletal care, as an alternative to GP care.

There were no adverse events associated with the physiotherapy service. Patients reported high levels of satisfaction with the physiotherapy service. Patients managed within the 1st Line Physiotherapy Service demonstrated clinical improvements (EQ-5D-5L, Global Rating of Change) at the six-month point.

The limitations of this pragmatic service evaluation are acknowledged. Nevertheless, the physiotherapy service appears to provide a safe and efficacious service. The service is well received by patients. There appear to be potential financial implications to the health economy.

Physiotherapists, as a first point of contact for patients with musculoskeletal-related complaints, could contribute to the current challenges faced in primary care.

Full paper: [Physiotherapy as a first point of contact in general practice: a solution to a growing problem?](#)

Goodwin, R. et al. | First point of contact physiotherapy; a qualitative study | Physiotherapy 2020 Vol.108: p.29-36.

This study explored stakeholder perceptions of patient awareness and understanding of First point of contact physiotherapy (FPCP) to better inform FPCP implementation.

Patient awareness and understanding was poor. Patients tended to view the GP as the default first contact practitioner. Traditional advertising approaches appeared on the whole invisible to patients and there was a reliance on signposting to facilitate patient access.

Findings from this study can inform implementation of FPCP. Several obstacles to the optimisation of FPCP were highlighted. Improved marketing of physiotherapy generally and FPCP specifically may increase patient awareness and understanding. However, it is likely further time will be required to bring about the cultural shift in public perception required to optimise the potential of FPCP.

Full paper: [First point of contact physiotherapy; a qualitative study](#)

Greenhalgh, S. et al. | A qualitative study to explore the experiences of first contact physiotherapy practitioners in the NHS and their experiences of their first contact role | Musculoskeletal Science & Practice | 2020 Dec; 50:102267

First Contact Practitioner (FCP) roles have been developed for health professionals with advanced practice skills to take on many of the musculoskeletal responsibilities currently carried out by general practitioners. FCP roles are new and still developing. Currently there is little research that has investigated the experiences of FCPs. This knowledge could help stakeholders and other clinicians gain an understanding into what makes a successful FCP role. The aim of this research was to explore the experiences of FCP working in North West England to gain insight into the first point of contact service, and their experiences of this developing full time FCP role.

Five themes were identified: 1. 'It's the level of clinical complexity that you're dealing with', 2. FCP role - rewards and challenges, 3. Own wellbeing, 4. Professional development and education, 5. Realities of working in practice governed by business.

FCP roles are an exciting development for people with MSK conditions, the physiotherapy profession, primary care providers and MSK physiotherapists. Mentorship support, workload and standards of training and practice are important when considering future expansion for the sustainability of these roles.

Full paper: [A qualitative study to explore the experiences of first contact physiotherapy practitioners in the NHS and their experiences of their first contact role](#)

Demont A. et al. | The impact of direct access physiotherapy compared to primary care physician led usual care for patients with musculoskeletal disorders: a systematic review of the literature | Disability & Rehabilitation | 2021 | Vol.43 (12): p.1637-1648

The aim of this paper was to update and appraise the available evidence with respect to the impact of direct access physiotherapy compared to primary care physician-led usual medical care for patients with musculoskeletal disorders in terms of efficacy, health care utilization and processes, health care costs, patient satisfaction, and compliance.

Emerging evidence of weak to moderate quality suggest that direct access physiotherapy could provide better outcomes in terms of disability, quality of life, and healthcare costs compared to primary physician-led medical care for patients with musculoskeletal disorders but not for pain outcomes. These conclusions could be modified when higher quality trials are published.

Direct access physiotherapy for patients with musculoskeletal disorders appears as a promising model to improve efficiency of care and reduce health care costs, but more methodologically sound studies are required to formally conclude.

Full abstract: [The impact of direct access physiotherapy compared to primary care physician led usual care for patients with musculoskeletal disorders: a systematic review of the literature](#)

Full paper available via NHS Athens or on request at [andrew.carrick1@nhs.net](mailto:andrew.carrick1@nhs.net)

Chinonso N Igwesi-Chidobe et al. | Implementing patient direct access to musculoskeletal physiotherapy in primary care: views of patients, general practitioners, physiotherapists and clinical commissioners in England | Physiotherapy | 2021 June; 111: p.31-39

Musculoskeletal problems are the leading cause of chronic disability. Most patients in the UK seek initial care from general practitioners (GPs), who are struggling to meet demand. Patient direct access to National Health Service physiotherapy is one possible solution. The purpose of this study was to understand the experiences of patients, GPs, physiotherapists and clinical commissioners on direct access in a region in England with it commissioned.

Direct access to NHS musculoskeletal physiotherapy is acceptable to patients and health care professionals (HCPs). There is need to ensure: effective communication between HCPs and with patients, clarity on the scope of physiotherapy and the direct access pathway, and sufficient resources to meet demand. Patient direct access can free GPs to focus on those patients with more complex health conditions who are most in need of their care.

Full paper: [Implementing patient direct access to musculoskeletal physiotherapy in primary care: views of patients, general practitioners, physiotherapists and clinical commissioners in England](#)