



PURE PHYSIOTHERAPY FCP SERVICES

Award-winning support to Primary Care.
Reducing frontline MSK pressure and improving patient experience.



What is an FCP Service?

Musculoskeletal (MSK) conditions make up to a third of a GP's caseload, and this number increases as patients get older. 85% of these patients do not need to see a GP and can be effectively managed by an experienced MSK clinician, who can see the patient early and give the right advice and intervention individualised to that patient; this is the role of first contact physiotherapy practitioners.

Musculoskeletal first contact practitioners (FCPs) have formed part of NHS England's long-term plan for supporting Primary Care.

FCP physios can help



Reduce the burden on GPs for patients with MSK complaints.



Streamline the MSK pathway.



'Right person, right place, first time.'



Make it easier for patients to access specialist MSK knowledge and skills.



MSK Challenges Faced by Primary Care



Variable confidence in managing MSK conditions.



Continued growth in MSK demand.



Increasing pressure on practice staff and PCNs.

The Solution

- ✓ FCPs who reduce pressure on practices and frontline staff
- ✓ Focus on practice and PCN priorities, recognising local population needs
- ✓ Immediate access to expert MSK clinicians with full clinical governance
- ✓ Enhanced expertise, education and resources on MSK issues accessible for all practice and PCN staff
- ✓ Minimal cost to PCN by utilising the existing funding schemes
- ✓ Flexibility to meet changing local needs and priorities

WE PROVIDE AWARD WINNING FCP SUPPORT!



Experience

Delivering tried and tested, ready to go, FCP solutions since 2016.



Governance

Full accreditation and governance accepted by over 140+ PCNs across the country.



Confidence

Expert team of more than 350 FCPs working to NHSE's prescribed governance structure.



Education

Working with PCNs and universities, informing best practice through research.

Why Choose Pure Physiotherapy?

Pure Physiotherapy have been working in primary care in a specialist MSK setting since 2014, making us one of the longest standing providers of FCP support to the NHS.

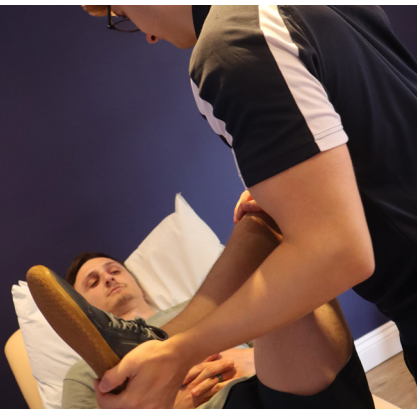
We are currently partnered with over 140+ PCNs and are very proud of the services we deliver (references available on request). Our results show significant improvements in the patient journey and offload GPs and clinical staff. We have also been able to demonstrate considerable cost savings by reducing referrals to secondary care, unnecessary imaging and prescriptions.

We offer:

- ✓ Nationwide team of experienced FCP physiotherapists (over 350 full time practitioners)
- ✓ Management team are involved in FCP development on a regional and national level
- ✓ Broad background in providing MSK support to the NHS
- ✓ Working in collaboration with NHS England and adhering to the Roadmaps
- ✓ Heavy focus on staff training and clinical development within all our services
- ✓ Proven FCP outcomes (data available on request)
- ✓ Flexibility of service options for remote or face-to-face services
- ✓ Clinically led organisation with genuine enthusiasm for the positive impact we create

We focus on:

- Demedicalising many MSK conditions and utilise current evidence base to inform patients as to what is often 'normal age related changes'.
- Our team has experience and training around how we interact with patients in a positive and empowering manner (CBT approach).
- We integrate with local pathways and other ARRS roles to maximise benefits for local PCNS.



Why our supported FCP service can reduce pressure

PCN Direct Employment

Identification and recruitment process (harder due to level of specialist knowledge required for the FCP role).

Specialist training needs (identification and implementation).

Additional insurance linked to FCP national competencies.

Sick pay and liability issues.

HR costs directly held.

Ongoing specialist training (clinic competencies, HCPC regulation, statutory training and HEE roadmap accreditation).

Difficulties in professional peer support network as limited FCPs in one area. this is an important element of the HEE requirements for safe practice/competencies.

Need for non-clinical management (additional internal cost) to manage the structure and service development.

Using Pure Physio

Extensive team of experienced FCP practitioners (350+).

Robust national and local training platform linking to the evolving competency for the FCP role.

We work with NHS England and the Chartered Society of Physiotherapy developing national competencies and our professional insurance is linked to this.

Our responsibility.

Our responsibility.

We have over 350 FCP physiotherapists and ACPs directly working with us, allowing great support and shared learning opportunities. Full support of our national network of FCP specialists.

We keep management costs low due to the clinically lead nature of our service.

We provide training for the PCN to integrate our services, usually run every 8 weeks.

Pure Physiotherapy works with many PCNs and groups providing FCP work, allowing best practice across different regions to be shared to benefit all.

How we deliver our FCP support

Our experience has allowed us to recognise the need to provide ongoing support, information and innovation to the organisations we partner with. We do this in several straight-forward ways:

- Each PCN/organisation has their own allocated team of FCP physios - we feel it's important to give a personal service and allow the physios to be part of the practice team.
- Typically we will provide 1-2 physios for each full time equivalent role to mitigate issues of annual leave, sickness or other absence – this gives a much more consistent service as you have a wider team of support and delivery.
- Within your FCP team, you will have a lead clinician for ease of communication and they will be supported by our operational lead, so local information can be disseminated with transparency and accuracy.
- We are happy to engage and join PCN meetings and service development meetings.

Monthly Key Data

We provide monthly key data on our service including:

- | | |
|--|--|
| <p>✓ Referral levels
To give clarity on utilisation and ensure good diary management.</p> | <p>✓ Number of follow ups
We target less than 10% follow ups to ensure no waiting list.</p> |
| <p>✓ Referral source (from reception team or GP)
Guides training for PCN and local practice team.</p> | <p>✓ Referral per practice
Ensures equitable usage across a PCN/organisation.</p> |
| <p>✓ Age range using service and body area
Guides our MSK training for all staff and the PCN/organisation.</p> | <p>✓ Any critical incidents or red flags identified
Ensuring joint learning and oversight can be demonstrated.</p> |
| <p>✓ Outcome of FCP consultation
1. GP involvement
2. Onward referral
3. Referral for imaging, injection, meds
This allows close monitoring of how patients are managed in the service – demonstrating the goal of offloading GPs and frontline clinical staff.</p> | <p>✓ Number and destination of onward referrals into existing MSK pathway and secondary care
This allows evaluation of referrals to level out of primary care and impact on secondary care (typically the referrals to secondary care reduce, but those converted into actions once they arrive in secondary care are increased).</p> |

Integrating with IT and clinical systems

We utilise best practice, robust supervision and support to clinical staff, as well as the best available digital resource to support patients.

Our team are fully trained and supported with a variety of primary care clinical systems:



EMIS



SystemOne



Vision3

Service Options

We are able to offer both face to face and remote services. Some PCNs have opted to use a combination of both, we are happy to flex our delivery to meet local needs.

Face-to-Face Services Based in GP Practices or Community Hubs

Practitioners can access local systems and provide ease of access for patients. This option also allows for good collaborative working and communication with primary care staff.

Virtual/Remote FCP Support

This approach has proved highly effective and straight forward to mobilise, we have our own hardware and software accredited by NHS Digital allowing us to access your systems where needed and make use of NHS verified email addresses.



FCP Mobilisation

Three Step 'Light Touch'

Start

Agreement to use Pure Physiotherapy to support your first contact practitioner service

Agree Working Model

- Shared hub or per practice provision
- Remote virtual or physical clinics
- Access requirements, either:
 - Using PCN computers
 - If remote, we can provide laptops and VPN access as required
- Begin process of setting up clinician access to clinical systems

Week 1-2

Set up Training for Clinical and Admin Staff

- Clear flowcharts for care navigation
- Training documents, videos supported by virtual/in-person meetings as needed
- Understand local referral pathways and services to allow easy integration

Week 2-3

Diary Templates Agreed and Created on Clinical System

- Diary populated prior to start date to allow booking and maximum utilisation
- Clinical staff (nurses, GPs etc) education programme implemented

Week 3-4

Finish

Completed mobilisation of a fully supported FCP service

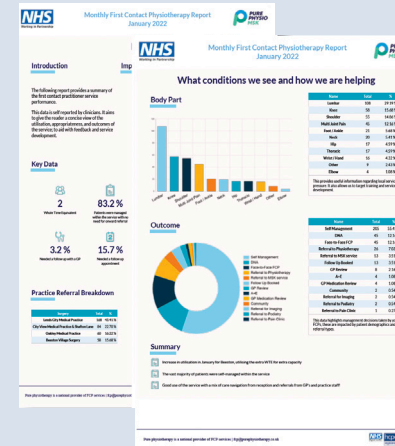
Week 4-5

Outcomes

We believe our focus on clinical quality and staff training is demonstrated in our FCP outcomes. They meet, and in most cases exceed, the national benchmarks. We aim to feedback PCN performance data monthly and use the information to guide further training or tackle any local problems.



Clear Monthly Reporting



Each month we pull together key information from our FCP service and provide this data in an easy to read format.

We welcome feedback on our service and have the flexibility to adapt to local need.

Integration with NHS England

Pure Physiotherapy's clinical director, Phin Robinson is one of NHS England's sentinel trainers for supervisors of FCP roles. We also work directly with many ICBs and regions across the country on the development of first contact roles in Primary Care.



We offer...

ADDITIONAL BENEFITS SUPPORTING PRIMARY CARE AND PATIENTS...

MSK Educational Support

Many of our staff are undertaking further studies at MSc and PhD level. This allows us to give time to developing our educational support for our partners. Recognising the pressures on frontline primary care staff, we try to disseminate this information in the most easily accessible format.

As part of the Additional Roles Reimbursement Scheme (ARRS), we demonstrate educational benefits to the organisations we partner with.

Research informing practice weekly bulletins



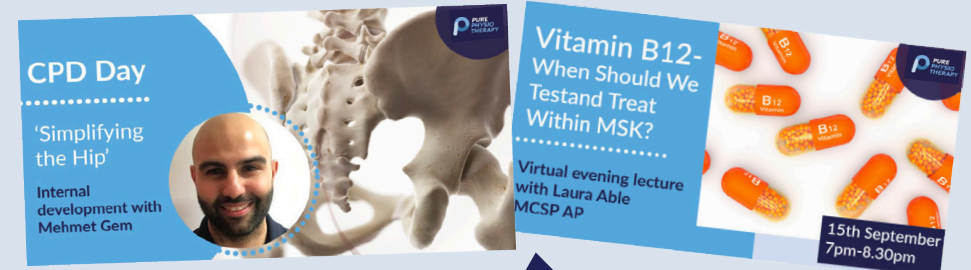
- Research published in peer reviewed journals is summarised by our expert team and sent to clinicians weekly with key 'clinical take-homes' identified (examples can be sent).

- We are happy to be observed by staff and students to engage with practice alongside supporting individual professional development plans.

- Local training on any MSK related topic as needed to the PCN staff via your local team of FCPs and national support.



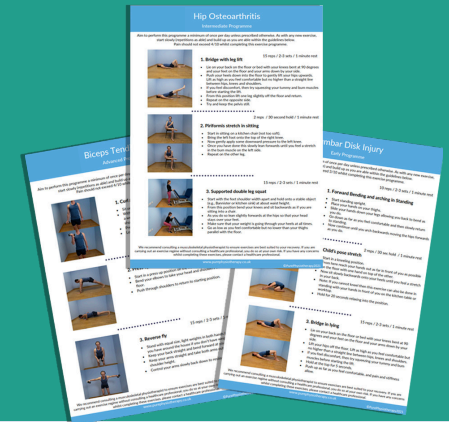
FREE monthly evening lectures



Free access to monthly evening lectures by external speakers on topics relevant to MSK primary care (orthopaedic surgeons, pain consultants, social prescribers etc).

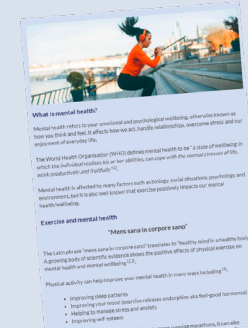
Rehabilitation Plans

- ✓ Rehabilitation plans created by our specialist physiotherapists
- ✓ 3 levels of difficulty
- ✓ Clear language and instructions
- ✓ Downloadable/printable
- ✓ Mobile friendly
- ✓ Visuals



Educational Blogs

We have a selection of blogs on different topics relating to common issues seen within patients. These include issues such as boom and bust, exercise and mental health and the MSK system and smoking.



Monthly Evening Lecture Feedback

Long Covid-What Are We Doing?
Evening Lecture Feedback

Every month Pure presents thought provoking lectures designed to supporting learning and development. Once again they delivered.

Really great session with Kay and Dominic sharing their knowledge and expertise and put in a really understandable way.

Really informative! Learned some stuff that I didn't yet know about, which now I can take to practice.

Very insightful learning more about long Covid and how we are caring for patients suffering symptoms.

see so many shoulder cases within primary care, so to get other professional advice on it was great!

Emmet presented on a great topic and managed to cram so much information in to one lecture.

With something physios see so regularly, I found it very insightful to discuss the subject as a whole.

An amazing lecture, presented well and learnt a lot! Thanks Emmet!

Vitamin B12-When Should We Test and Treat Within MSK
Virtual Evening Lecture Feedback
With Laura Able

Laura managed to create a really interesting presentation on Vitamin B12 and how best to treat and test within MSK.

I would recommend attending a lecture of this kind to anyone working in MSK as Laura managed to cover several important topics!

Laura was great, subject was great and learnt a lot!

Very interesting and insightful topic: opening a great discussion in the team, thanks Laura!

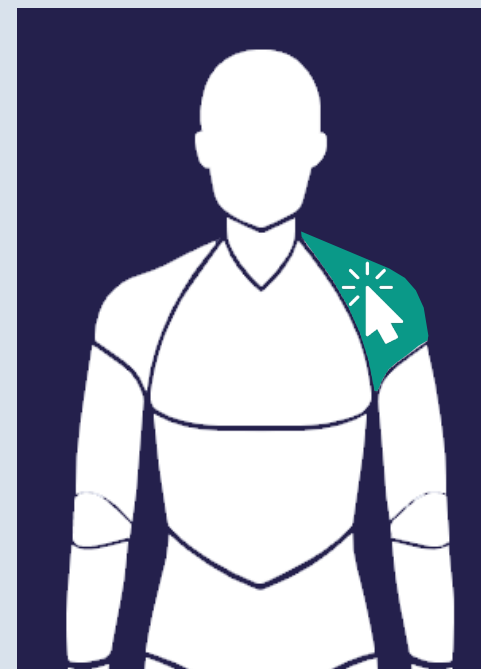
Update On Surgical Management Of Common Shoulder Pathology In Primary Care
Virtual Evening Lecture Feedback

Amazing feedback from all our virtual lectures which are free to attend by our Primary Care Partners



We've created dedicated resources for patients

Specialist website and app with self help tools and over 60+ condition pages for patients and practitioners.



Interactive digital patient resources can be sent direct to patients

- ✓ **FAQ'S**
- ✓ **Evidence-based condition information**
- ✓ **Recovery tips**
- ✓ **Rehabilitation plans**

Case Studies

We produce case studies integrating the current evidence base. These are used for education within the wider PCN team, helping to improve the team's confidence in managing MSK conditions in the best possible way.

Table 1: Primary care wells criteria and PE probability (1) Walsh & Agha, 2012.

Score	Classification	PE probability
<2	Low	0%
2-4		
4+		

Table 2: Wells criteria post-trauma

Score	Outcome
<2	No
2-3	Yes

Table 3: Simplified 1+ve Wells criteria (Alpha, 2012).

Score	Outcome
Simplified Wells	Yes

FCP Case Study
Calf Pain In a 57-Year Old Male

Subjective Assessment

Presenting Complaint: Right Calf Pain

History of Presenting Complaint:

- 2/2 of sudden-onset, worsening right leg pain.
- Patient reported he thought his symptoms started when from near recent episode of running.
- GP consultation 5/7 prior to FCP at x 3 Achilles tendinopathy.

Location:
Pain at the posterior aspect of the right belly of the calf.

Aggravating factors:
Walking (relaxation does ease but patient's familiar symptoms are not eradicated and are not then reproduced with the onset of walking).

Easing Factors:
Nil

Neuro and Red Flags:
Nil malignancy features, Nil neurological features.

Medications:
Atorvastatin, Bisoprolol

Special questions:

- +ve unilateral peripheral oedema.
- +ve localised tenderness to distribution of calf
- +ve decreased ability to ambulate to pain/tightness
- +ve fever symptoms
- +ve discoloration
- +ve recent trauma/in-patient care.

Objective Examination

Right lower limb:
FABOM ankle-p1 EOR PE FABOM T1 p1 EOR extension.

- +ve pitting oedema
- +ve tenderness to posterior leg
- +ve 3cm calf circumference difference ipsilateral/contralateral limb
- +ve entire swelling of right lower limb
- +ve Thompson if -ve p1 palpation to AT.

Lumbar Spine:
Neuro assessment:
FABOM NAD.

- +ve SLR/Slump
- Nil myoelectric or dermatomal abnormality.

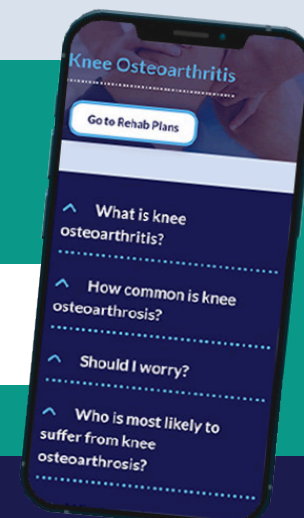


Conditions and Information

Self help tools to improve individual's self efficacy and understanding how to get the best function possible. Empowering them with knowledge and clear information to encourage them to make the right choices.

Our app is second among the 'Top 5 apps for optimal physical health' by **MUO MAKE USE OF**

Free app for your patients!





Evolution and Innovation

By fully engaging with our partners, we can evolve our services to meet their needs.

We have many examples of this, such as:



Frailty assessment and proactive management.



Persistent pain management programmes integrating ARRS roles - partnering with national experts. **Read more about our partner, Rehab Direct.**



Integration with existing community services to address health inequalities.



Digital innovation around accessibility and data collection and output analysis.

REHAB DIRECT LONG-TERM CONDITIONS



- ✓ We collaborate with, and enhance existing roles (e.g. social prescribers & clinical pharmacists).
- ✓ Add demonstrable value to patients presenting with long term conditions.
- ✓ Expert assessment and individualised goals and care plans.
- ✓ Empower patients to be more confident and facilitate self-management.
- ✓ We compliment existing healthcare and community services.
- ✓ Accept referrals from all partners in primary care.
- ✓ Self-referral pathway encouraged.
- ✓ Integration with local community services (e.g. walking groups, help the aged & social groups).
- ✓ In line with 2021 NICE Guidelines.



Fully Integrated Service

Persistent pain and complex MSK conditions represent some of the most complex challenges for primary care; behaviours and beliefs of this patient cohort are often ingrained and difficult to influence. We deliver a comprehensive modular service based on patient needs to facilitate long term, meaningful change.

We do this in several ways:



Flexible Service

Each PCN/organisation will have their own specialist LTC management team.



Integrated Approach

Integrating with ARRS and other roles, local health and community services to strengthen primary care teams.



Improve Wellbeing

Optimising and maintaining wellbeing and quality of life for our patients.



“I’ve been working with Pure Physio for around two years, and from my first interaction with them, it’s been a great experience”
- Tara Humphrey, PCN manager and Primary Care Consultant



“It’s a fabulous service that all of our practices really value. It’s the most successful PCN service we’ve ever had and is having a huge impact”
- Dr P Velayuthan CEO of one health, Lewisham



“I would highly recommend Pure Physiotherapy to any PCN or practice looking to offer professional, experienced and flexible FCP service”
- Chris Stocks, Joint Management Lead for Network North PCN



Award-winning support to Primary Care.
Reducing frontline MSK pressure and improving patient experience.

Recent awards...



GET IN TOUCH

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OR

Email Pin, Founder & Director at Pure Physio, and FCP ambassador for Health Education England to set up a 30-minute call: phin.robinson@purephysiotherapy.co.uk

Visit our FCP website

Download our clinical MSK app

