

ED KIRBY

The Story of

KEV

and

LOU



The brief from their evil manager...

Release GP time through re-allocating appointments for patients with MSK problems



Improve conversion rates to surgery

Improve the use of imaging

Prevent short-term problems becoming long-term conditions



Will I get opportunities to develop experience, learning and skills?

Setting up at Kev's GP Practice

FCP means you get a highly experienced physio in your practice

Yes I can do injections

Oooh, Impressive



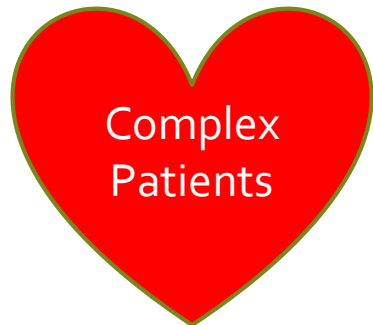
MRI scans.....
no problem

.....By the way I'm now
an APP not an ESP



?!?

3 months later.....



Meanwhile.....

The receptionist said you'd give me a massage!



Grrrrr...



The 6 month meeting with evil manager.....



- The GP's might love you Kev, but:
- GP contacts for MSK haven't changed
 - Referrals to physio and orthopaedics have gone up
 - Injections have increased
 - You are seeing too many follow-ups

This is a **FIRST** contact service



The 6 month meeting with evil manager.....



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hehehe.....

- **Lessons:**

- The type of referrals determines the success or failure of the service.
- The best way to influence this is locally. The message and constant feedback that the clinician gives to the practice determines the referrals.
- The FCP service needs to integrate with current services and pathway eg. Tier 2 services.
- Embargo slots