

# Podiatrists as First Contact Practitioners



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## Key Points

Across the UK the way that people access healthcare is changing, not only to meet the needs of an ageing population living with long term conditions, multi-morbidities and co-morbidities, but also to meet people's changing expectations of healthcare delivery. Getting the right advice, from the right clinician, at the right time and in the right place reduces the personal and societal health care burden.

- Podiatrists are experts in lower limb health and disease, and have the requisite knowledge, skills and training to work as First Contact Practitioners (FCPs) in primary care
- Employing podiatrists as FCPs would ensure people got the right advice at the right time, and would significantly reduce GP workload; recent evidence demonstrated that referral to podiatry is the third most common referral made by GPs<sup>1</sup>
- A large public survey found that over 85% of people would like direct access to a podiatrist without going through a GP<sup>2</sup>

A recent study found that 'enabling people who have foot pain to self-refer to a podiatrist working as a FCP and/or foot health service has the potential to significantly reduce the burden of foot and/or ankle pain on GPs'.<sup>2</sup>

## Context

Across the UK, people have traditionally accessed healthcare through their local GP in Primary Care. As an ageing population increases, this method of accessing healthcare is under strain in all four nations of the UK. In May 2019, national mainstream media highlighted this increasingly urgent issue noting 'the first sustained fall in GP numbers for 50 years.'<sup>3</sup>

However, this challenge for primary care is not just about demand for GP services but also the increasing complexity of healthcare that is required. As more people are living longer, greater numbers are presenting in primary care with symptoms of long term and complex conditions that require specialist diagnosis or treatment from a range of healthcare professionals working as part of a team across primary and secondary care settings. Podiatrists working as FCPs have the expertise, training and existing infrastructure to provide the required specialist professional service for a large number of people with complex foot health needs.

General Medical Services (GMS) contracts introduced in the UK, for example the 2020/21 GMS Contract in England, makes provision for healthcare professionals, including podiatrists, to work alongside GPs through a reimbursement scheme. Similarly, the 2018 GMS contract in Scotland requires GPs to work alongside other healthcare professionals in FCP roles within primary care.

In accordance with recent government policy, as set out in Table 1 below, podiatrists in FCP roles are the right healthcare professionals to deliver the right care, at the right time for a large proportion of the population. Podiatrists in FCP roles have the potential to improve patient outcomes, reduce activity limitation, prevent further declines in sedentary related health conditions, reduce hospital admissions and positively contribute to the national health economy.

**Table 1: UK Government policies relating to First Contact Provision**

Nation	Policy Document	Year of Publication	Key quote
England	The NHS Long Term Plan	2019	'We will build on work already undertaken to ensure patients will have direct access to MSK First Contact Practitioners.' <sup>4</sup>
England	Advancing our health: prevention in the 2020s - consultation document	2019	'The 2020s will be the decade of proactive, predictive and personalised prevention.'
Scotland	National Health and Social Care Workforce Plan Part 3 - Improving workforce planning for primary care in Scotland.	2018	'Podiatrists are equipped with the skills to access A fully integrated primary care podiatry service can safely diagnose, manage, rehabilitate and prevent disease related complications of the feet, ankles and lower limbs particularly around MSK, diabetes, rheumatoid conditions and peripheral arterial disease.' <sup>5</sup>
Wales	A Healthier Wales	2018	'Over the next decade, we will see a shift of services from large general hospitals to regional and local centres.' <sup>6</sup>
Northern Ireland	Delivering Together 2026	2017	'Our future model of primary care is to be based on multidisciplinary teams embedded around General Practice.' <sup>7</sup>
UK	UK Chief Medical Officers' Physical Activity Guidelines	2019	'If physical activity were a drug, we would refer to it as a miracle cure, due to the great many illnesses it can prevent and help treat.' <sup>8</sup>

### Podiatrists' role as First Contact Practitioners

Podiatrists are unique in working across conditions rather than a disease specific area. A podiatrist's training and expertise extends across population groups to those who have multiple chronic long term conditions, which place a high burden upon NHS resources (diabetes, arthritis, obesity and peripheral arterial disease).

Podiatrists are experts in all aspects of foot and lower limb function and health. Podiatrists are highly skilled healthcare professionals trained to diagnose, treat, rehabilitate and prevent abnormalities of the foot and lower limb. They can enable patients to manage foot and ankle pain, manage skin conditions of the legs and feet, treat foot and leg infections and assess and manage lower limb neurological and circulatory disorders. In addition to delivering wider public health messages in order

to minimise isolation, promote physical activity, support weight loss strategies and healthy lifestyle choices, podiatrists keep people mobile, in work and active throughout their life course.

Podiatrists are trained to work autonomously and as part of multidisciplinary teams to safely diagnose, risk assess and triage, and provide advice and initiate treatment for complications of the foot and lower limb. The expertise of the podiatrist as a First Contact Practitioner is wide ranging, facilitating for early identification of a range of conditions. Podiatrists working as FCPs have the skills and competence to:

- Request and use diagnostic imaging or other tests such as blood screening or urine analysis
- Refer to or liaise with other health professionals across care settings
- Supply or administer a range of medicinal products, and in some instances independently prescribe medicines

Podiatrists also have a significant role in the public health and prevention agenda specifically around falls prevention, dermatology (malignant melanoma detection), diabetes prevention, cardiovascular risk reduction, medicines management, antibiotic stewardship and keeping people mobile and active. See pathway 1 for suggested route.

### **Demand for Podiatry services from the public is increasing**

Demographic changes across the UK mean that more people are living longer with co-morbidities, which can lead to a multitude of foot and lower limb complications, which require specialist podiatric intervention.

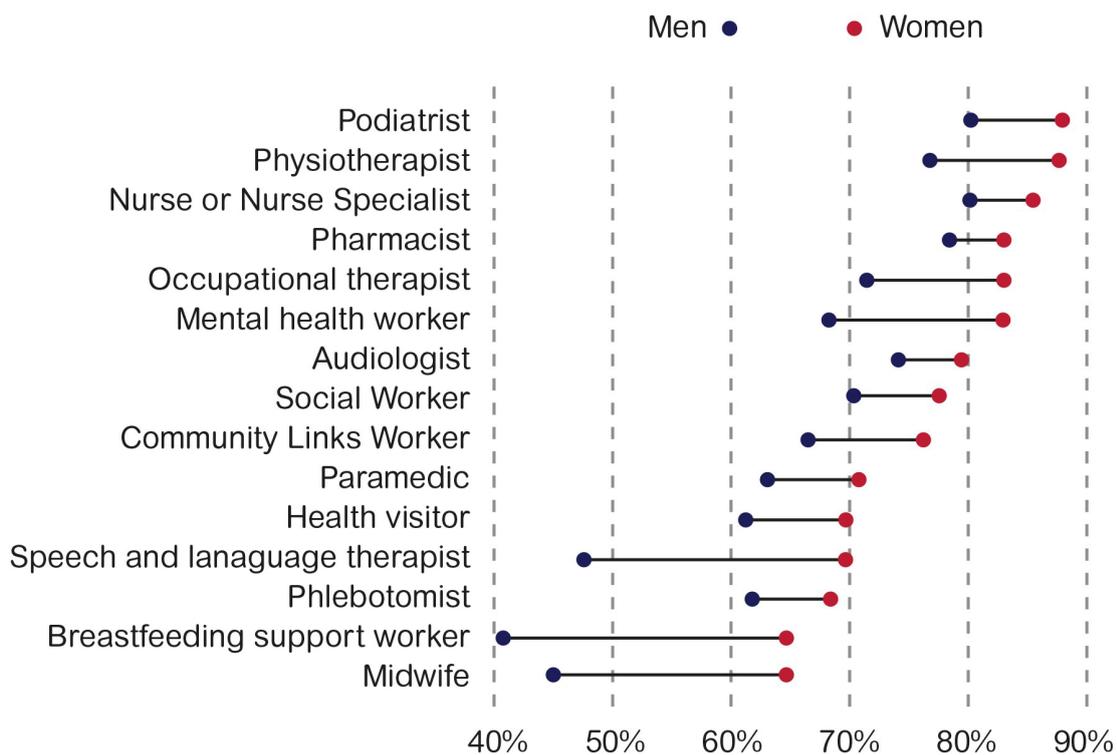
A recent survey of the public demonstrates that there is a demand for podiatry and a wish to see podiatrists as FCPs within Primary Care. The Scottish Parliament's Health and Sport Committee report, 'What should primary care look like for the next generation?'<sup>2</sup> included the results from a survey of over 2,500 members of the public who were asked:

'Would you like to see other health professionals in the primary care team without going through your GP?' Over 85% of respondents (see Figure 1) indicated that they would wish to see a podiatrist working as a FCP. This was the highest score amongst the fifteen professions who were listed, which demonstrates the need and demand for podiatrists to be working as FCPs in Primary Care.

The high burden of poor foot health is currently falling on already stretched GP services.

Employment of podiatrists as FCPs in primary care, creates opportunity for people to see the right person in the right place at the right time.

**Figure 1:** Respondents were asked: 'Would you like to be able to see other health professionals in the primary care team without going through your GP?'



## Defining First Contact Practitioner roles

A First Contact Practitioner (FCP) role is one carried out by diagnostic clinicians based in primary care. Patients are able to access FCPs without having to first be referred by a GP or another healthcare professional, and because they are based in primary care they can be accessed as close to home as possible, which is a key strategic outcome for health in all four nations of the UK.

In some UK health regions people are able to directly access foot health services. However, there is regional inequity. In other areas, access to foot health advice is via a GP or via private practitioners, creating potential access to health barriers or increasing socioeconomic inequity.

A First Contact Practitioner is an advanced diagnostic clinician, with an understanding of the personalised and integrated care agenda, and advanced decision-making skill to initiate the right

support programme in a timely manner. Typically, those professionals working within first contact roles do not initiate treatments. However, as First Contact Practitioners, podiatrists already have the necessary clinical expertise and skill, therefore in some instances they may initiate therapy to prevent unnecessary delay and expedite that patient journey. This can lead to further improvement in health outcomes or reduction in personal, societal or healthcare burden.

### **Non-Medical Prescribing**

Podiatric non-medical prescribers can prescribe any medicine for any medical condition within their scope of practice and legislation. This includes 'off-label' medicines, subject to accepted good clinical practice. They are also licensed to prescribe certain controlled drugs for oral administration, e.g. diazepam, dihydrocodeine tartrate, lorazepam and temazepam.<sup>9,10</sup>

As is the case for all prescribers, podiatrists are responsible for the prescriptions they sign and for their decisions and actions when supplying and administering medicines and devices, or when authorising or instructing others to do so. They must be prepared to explain and justify their decisions and actions when prescribing, administering and managing medicines.<sup>11</sup> This valuable additional clinical expertise and skill brings further benefit to the role of podiatrists as FCPs.

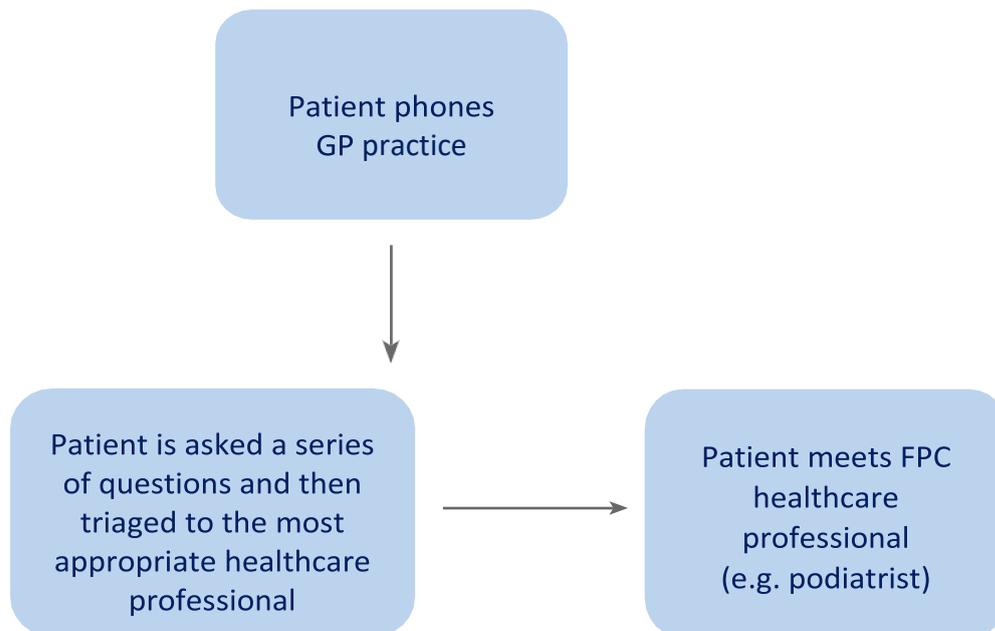
### **Scope of Podiatrists in First Contact Practitioner roles**

The types of symptoms that means a person should see a podiatrist working as a FCP include:

- Pain in the foot or lower limb, particularly that which is acute, worsening or leading to reduced walking ability
- Lack of sensation or altered sensation in the foot or lower limb, particularly that which is acute, worsening or leading to reduced walking ability
- Areas of swelling in the foot or lower limb, particularly that which is acute, worsening or leading to reduced walking ability
- New/ changing lesions or marks on the foot or lower limb
- Painful or non-healing breaks in the skin (wounds) on the foot or lower limb
- New or changing colour or temperature to the foot or lower limb

- Decline to foot or lower limb health that is of such magnitude for the individual that they are no longer able to engage with tasks of routine daily living, work, undertake childcare, or are leading to increasing clinical anxiety or depression

### Pathway 1. First Point of Contact (based around GP clusters)



#### Podiatrist assesses the patient and either:

- Provides the patient with expert self-management advice
- Refers the patient onto a specialist podiatry (or other) service (e.g. MSK, Diabetes, Vascular, Dermatology) and/or provides first line treatment
- Carries out a specialist intervention (e.g. steroid injection for relief of pain)
- Requests and uses diagnostic imaging, or other tests (e.g. blood screening or urine analysis)
- Supply or administer a range of medicinal products, and in some instances independently prescribe medicines

## Conclusion

The primary care system across the UK is under strain and needs to be re-shaped in order to meet the healthcare needs of the population, now and in the future. The burden of poor foot health is high and increasing and frequently experienced by people with complex and long-term healthcare needs.

Recent evidence has highlighted the high demand for podiatry within primary care. Podiatrists working as FCPs have the potential to significantly reduce demand on GPs, whilst at the same time ensuring people see the right person, at the right time, closer to home which improves patient outcomes.

There are a variety of ways in which podiatrists work as FCPs, whether this is a direct access podiatry service in the community or a podiatrist working as an FCP as part of a multidisciplinary team operating around a GP cluster. The benefit to the patient of the FCP model should be rapid access to the right person, at the right time, in the right place; they should receive tailored advice, diagnostics, treatment and onward referral where necessary.

Podiatrists provide a valuable offer to the primary care system both in terms of increasing capacity and reducing the societal or healthcare burden associated with poor foot health or reduced walking ability.

Podiatrists fulfilling FCP roles will not only enhance the foot and lower limb health of patients, but will also improve their overall health and wellbeing. People should be able to access podiatric interventions in primary care so they are able to remain active, socially connected and in work. It is only by having podiatrists placed within primary care settings as FCPs that these multiple needs will be met.

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