

HEE/NHSEI Position Statement: Implementing the FCP/AP Roadmap for AHPs in Primary Care

As part of the Long Term Plan, Primary Care Networks (PCNs) and General Practice are encouraged to build a team of people with diverse skills and competencies to support increased access for patients, alleviate pressures on existing staff, and improve the quality of care and services. The Additional Roles Reimbursement Scheme (ARRS) provides PCNs with funding for some of these roles. Staff can be reimbursed in line with their skills and competencies and the role that they are undertaking, up to the maximum level of reimbursement set out in the Network Contract DES.

Employers need to ensure that staff are operating within the limits of their capability and provided with appropriate supervision to enable them to do so. Allied Health Professionals (AHPs) are not required to be First Contact Practitioners (FCPs) or Advanced Practitioners (APs) to work in primary care. However, those that are not qualified as FCPs will not be able to operate at that level of clinical practice. The capabilities are outlined in the FCP roadmap

To help provide clarity, we will provide some narratives suggesting the scope of practice for AHPs operating at different levels of competency. PCNs, in liaison with relevant partners and Training Hubs, will need to ensure that all AHPs receive an appropriate level of supervision in line with their role and level of capability.

Experienced staff may wish to be verified as, or become, FCPs and APs, subject to the provision of training and educational supervision. This creates a developmental and career path for staff and introduces standardised terms across all disciplines so that patients, staff and employers can be confident about the post holder's level of competence.

FCPs and APs will have the competencies to see and manage more clinically complex patients. They will be able to work independently in primary care, within their scope of practice and with appropriate clinical supervision; and Advanced Practitioners will be able to supervise other members of the MDT which will reduce the supervisory burden for PCNs.

As signatories to the Network Contract DES, practices in PCNs are responsible for ensuring that all staff meet the education and training requirements it sets out and operate within the scope of their practice or capability for their discipline.

Specific requirements exist with regards to FCPs and APs for First Contact Physiotherapists and Paramedics reimbursed under the ARRS; and for the reimbursable Advanced Practitioner role:

1. **First Contact Physiotherapists:** The FCP road map for Musculoskeletal (MSK) FCPs has been published and includes clear competencies and training requirements for the roles. As per the Network Contract DES, First Contact Physiotherapists must be working at level 7 in their clinical work to be eligible for reimbursement under the ARRS. The criteria for demonstrating academic level 7 (MSc) capability is detailed in the MSK FCP/AP roadmap.
2. **Paramedics:** As per the Network Contract DES, paramedics who are employed under the Additional Roles Reimbursement Scheme need to have completed their two-year 'Consolidation of Learning' period as a "newly qualified paramedic" and have a further three years' experience as a AFC Band 6 (or equivalent) paramedic. In addition, they need to be working towards developing academic Level 7 capability in paramedic areas of practice and, within six months of commencement of reimbursement for that

individual, have completed and been signed off formally within the clinical competencies of the FCP Roadmap. However, a longer time period for this can be agreed with the commissioner where it is appropriate for the needs of the PCN and the paramedic. Where a paramedic is not working at academic Level 7 capability, the PCN must ensure that they are working as part of a rotational model in which they have access to regular supervision and support. We encourage PCNs to work with their systems and local ambulance trusts to come to an arrangement that ensures that the paramedic is operating within the scope of their competency.

3. **Advanced Practitioners:** Each PCN is entitled to claim reimbursement for one AP under the ARRS. This AP can be from any of the AHP or clinical pharmacist roles currently reimbursable under the scheme i.e., Physiotherapists; Paramedics; Occupational Therapist; Dieticians; Podiatrists or Clinical Pharmacists. To be reimbursable the AP needs to be operating at academic level 7 in each of the four pillars of clinical practice; leadership and management; education; and research. More information on the Multi –professional Advanced Clinical Practice Framework can be found here:

<https://www.hee.nhs.uk/sites/default/files/documents/Multi-professional%20framework%20for%20advanced%20clinical%20practice%20in%20England.pdf>

The roadmaps have an ongoing process of revision as we all learn more about these new roles in practice.

May 2021