

Additional Roles in General Practice

Richmond Patient Experiences

Aim

To understand **patient experiences** and preferences in having appointments in GP practices with **additional roles**. This includes nurses, pharmacists, physiotherapists, physician associates and more.

Background

In 2019, the Additional Roles Reimbursement Scheme was introduced with the aim of recruiting 26,000 additional staff into general practice. Primary Care Networks can claim reimbursement for the salaries of 17 new roles.

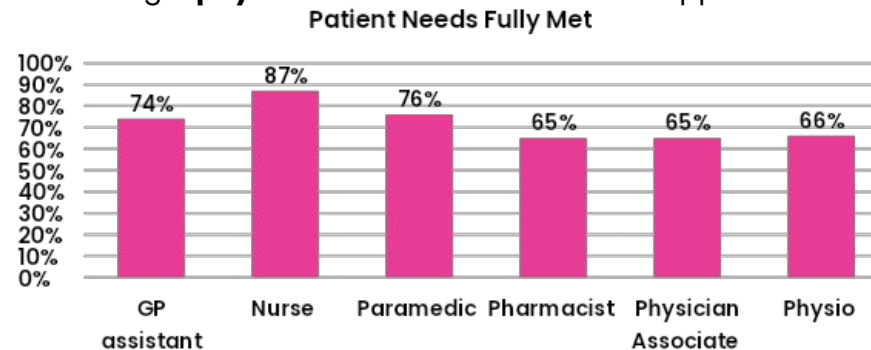
Method

We got 2,700 responses to an online survey, which we co-designed with GPs and the Richmond GP Practice Alliance.

The survey was distributed through Richmond council's newsletter, VCSE partner social media and by GP practices themselves.

Results

- Respondents said that they would be happy to see someone in an additional role if it **freed up capacity** in the system for others.
- **120+ respondents** reported seeing a professional but **not knowing who they were or what their role was**. As a result, respondents did not feel confident in the care they had received.
- Respondents particularly commented on **nurses'** professionalism and competence.
- Respondents said that a **pharmacist** was better than a GP for medication issues.
- Respondents reported not feeling listened to in appointments with **physiotherapists**.
- Respondents particularly commented that they didn't know they were seeing a **physician associate** before their appointment.



Conclusions

- Respondents reported **high levels of satisfaction** for appointments with professionals in additional roles.
- **Greater clarity** is needed regarding the services that professionals in additional roles can provide to patients. **Easily accessible information** on each role needs to be sent to patients before their appointment.
- **Patients need to know who they will be seeing for their appointment**. Professionals need to introduce themselves and explain their role and limitations at the start of appointments.

Impact

- Informed the **General Medical Council regulation** on physician associates.
- Submitted evidence to the **national review** on physician associates.
- Participated in a **round table discussion for the national review** on future role of physician associates.

