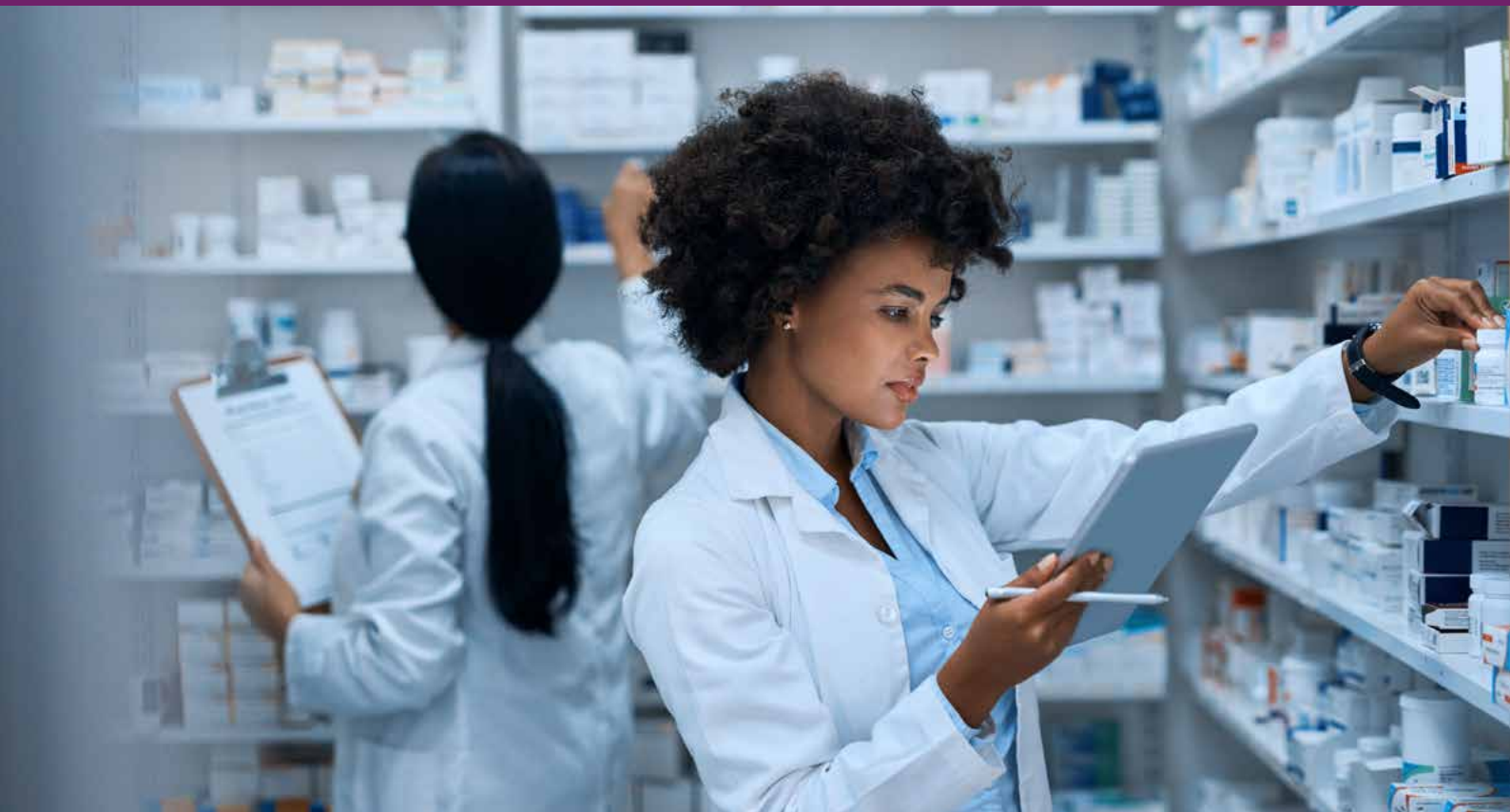




POLICY BRIEFING



New roles in primary care

How can the implementation and integration of new roles in primary care be better supported?

The Additional Roles Reimbursement Scheme (ARRS), which aims to add 26,000 new clinical roles within primary care, is a key element of the government commitment to increase GP appointments by 50 million. These roles are made up of established professions, such as pharmacists, physiotherapists and paramedics, as well as new professions such as social prescribing link workers.

However, a recent Kings Fund report (Baird et al 2022) has found that there are challenges implementing and integrating these new roles effectively, with the risk that the ARRS scheme will fail to have its intended impact.



Issues with the implementation of additional roles

The Kings Fund report (Baird et al 2022) focused on four ARRS-funded roles – social prescribing link workers, first-contact physiotherapists, paramedics, and pharmacists. Baird and her team found that:

- there was a lack of shared purpose within many Primary Care Networks (PCNs).
- often there was no team identity, making it difficult to deploy network-wide staff.
- there was confusion amongst GPs about what the additional roles would mean for them.
- there has not been adequate support available to the PCNs to incorporate the new roles.
- this lack of supported implementation has meant the core needs of those working in ARRS roles – autonomy, belonging and control – have not been met in a lot of cases.

Research being carried out within the [Future Ready Workforce](#) stream at the [Plymouth Institute of Health and Care Research](#) can help support implementation of these new roles using the latest evidence-based learning.



Recommendations from the research

- Clearly define the remit and boundaries of the new roles.
- Support should be evidence-based, ongoing and tailored to the needs of the staff member and role.
- GP practices should provide training sessions for all employees about the new roles, their scope of practice, and processes for referral.
- Staff members should be incorporated into the practice team, where possible, through attendance at meetings, being given their own practice space so they feel a sense of belonging.



The research projects and what they found

The D-PACT project has developed and evaluated a Dementia Support Worker role. This role provides continuity of proactive support for those with dementia and their carers through a named, trusted individual, based in primary care (Griffiths et al 2022:3). Whilst still in progress, this project has highlighted the importance of providing different levels of support to workers to promote retention and allow people to feel a sense of job satisfaction.

Part of the project is focused on how best to support the Support Workers by helping them understand and adjust to their new roles in practice. A multi modal support package has been created that offers training through manuals, an online course and 'live' interactive training. In addition, ongoing support is delivered through supervision and peer support which focuses on skill development (especially in coaching), case management, managing risk, emotional support, and career development. Individual and co-reflection are core activities within each of these areas of support (Dr Hannah Wheat, personal communication). The project has also involved training the supervisors of the Support Workers and providing them with their own supervisors and peer support network, so that they can also feel supported to provide appropriate support (Dr Hannah Wheat, personal communication).

A second study looked at the experience of Social Prescribing link workers as they were embedded into primary care across several practices in Devon and Cornwall (Hazeldine et al 2021). The study found that extra training was needed for those link workers who did not have a mental health background as many of the patients they saw were unwell. A lack of awareness and understanding of the link worker role amongst their primary care colleagues was identified, which hampered the referral process. Social prescribing 'champions' played an important role in integrating the link workers into the practice team. These were usually practice staff with a good understanding of social prescribing. GP practices facilitated the integration of the link worker by providing practice space, access to wifi and patient records, and inviting them to team meetings, although this did not always occur. The importance of workforce support and supervision was highlighted, including a need for one-to-one supervision in a confidential safe space, although this was not uniformly available.

Background information

Updated contracts have expanded the scope of roles and by 2023/24, each PCN will have on average approximately 20 FTE staff funded through the ARR Scheme (Baird et al. 2022). One estimate suggests that up to a quarter of a GP's overall time could be saved through new ways of working, with greater use of other staff (Health Foundation et al 2018).



Where to get more information

Information about the D-PACT project can be found here: [D-PACT: Dementia PersonAlised Care Team](#). Information about research into social prescribing at the University of Plymouth can be found here: [Social Prescribing](#).





References

- Baird, B., Lamming, L., Bhatt, R., Beech, J. & Dale, V. (2022) *Integrating additional roles into primary care networks*. London: [The King's Fund. Integrating additional roles in general practice report\(web\).pdf \(kingsfund.org.uk\)](https://www.kingsfund.org.uk/publications/integrating-additional-roles-general-practice)
- Griffiths et al. (2022) 'Engaging Stakeholders in Realist Programme Theory Building: Insights from the Prospective Phase of a Primary Care Dementia Support Study', *International Journal of Qualitative Methods*, Volume 21: 1–16.
- Hazeldine, E., Gowan, G. Wigglesworth, R., Pollard, J., Asthana, S. & Husk, K. (2021) 'Link worker perspectives of early implementation of social prescribing: a 'Researcher-in-Residence' study', *Health and Social Care in the Community*, [Link worker perspectives of early implementation of social prescribing: A 'Researcher-in-Residence' study - Hazeldine - 2021 - Health & Social Care in the Community - Wiley Online Library](https://onlinelibrary.wiley.com/doi/10.1111/hsc.12700)
- Health Foundation, The Kings Fund, and Nuffield Trust (2018) *The health care workforce in England: make or break*. [The health care workforce in England - The Health Foundation](https://www.healthfoundation.org.uk/publications/the-health-care-workforce-in-england)



Dr Tomasina Oh

tomasina.oh@plymouth.ac.uk



Dr Kerry Husk

kerry.husk@plymouth.ac.uk

