An example of a PCSP appointment structure flowchart

YEAR OF CARE PARTNERSHIPS

Prevention: hypertension/ health checks	NAFLD/ high risk of diabetes	CHD and PAD/TIA Stroke/AF/ IHD and angina	Diabetes/ CKD	HF	MSK RA/Gout	Coeliac disease **	Thyroid disease **	Frailty	COPD	Mental health

Epilepsy **	Asthma	IBS **	MSK OA/OP & fragility **

Always require information gathering with the healthcare assistant (HCA) and initial disease surveillance

Allow 20 minutes and add 10 minutes for feet
(Suggested tests and tasks listed in separate document – ensure HCA sufficiently trained)
HCA also supports patient prepare for the PCSP conversation

Only involved in an information gathering appointment when have other conditions

Safety netting of test results and triage in terms of most appropriate person to see patient

Preparation materials:

- Generic agenda setting prompt
- Sharing of routine test results
- Specific condition self-assessment tools

Preparation materials:

- Generic agenda setting prompt
- Specific condition self-assessment tools

**May not require PCSP conversation

Personalised care and support planning conversation

(Usually 20-30 minutes)
No specific assessments/examinations to be completed during discussion

PCSP conversation may be remote by agreement with practice and patient especially for those who are less complex

©Year of Care Dec 2024