

# Outsourced Model Advantages

Outsourced FCP provision through specialist primary care workforce providers offers particular advantages for PCNs in the early stages of service development or those lacking HR infrastructure for additional roles. Understanding these benefits enables clinical directors to make informed procurement decisions aligned with PCN capabilities and strategic objectives.



## Reduced Recruitment Risk

Established providers maintain talent pipelines and can deploy FCPs rapidly, avoiding lengthy recruitment processes in competitive markets. Providers absorb the risk of recruitment failure, professional registration issues, or probation period outcomes. This proves particularly valuable in geographical areas with FCP shortages or for PCNs without recruitment experience for advanced practice roles.



## Immediate Mobilisation

Services can be operational within 4-6 weeks compared to 3-4 months for direct recruitment. This acceleration matters when facing access pressures, ARRS funding deadlines, or ICB performance scrutiny. Early impact builds momentum and GP confidence faster, increasing utilisation rates and demonstrating value during the critical initial implementation period.



## Structured Governance

Providers typically deliver pre-built governance frameworks including supervision protocols, audit processes, clinical policies, and incident management pathways. This infrastructure removes governance development burden from PCN clinical leads whilst ensuring CQC compliance from day one. Governance structures reflect learning from multiple implementations and incorporate sector best practice.



## Scalable Across PCN

Outsourced models facilitate flexible capacity scaling in response to demand patterns or practice-specific needs. Additional sessions can be commissioned without recruitment processes, and capacity can be reduced without redundancy implications. This flexibility proves valuable during service maturation when optimal capacity levels are being established through utilisation monitoring and GP feedback.