

# Vol. 8 (2021): A Healthcare Workforce Cadre That Meets A Country's Needs

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#### United Kingdom Physician Associates

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**General Information:** 

Physician Assistants (PAs) were first introduced to the UK in 2002 when two PAs were employed from the USA [1]. A further 11 PAs followed, working in a similar region, with a report commissioned in 2004 to evaluate the impact of the role [2], followed by a further pilot scheme in Scotland [3]. In 2005, the UK Association of Physician Assistants (UKAPA) was registered as the professional organization.

In 2013, the profession changed its title from Physician Assistant to Physician Associate, to aid further progress towards statutory regulation. In 2015, UKAPA and the Royal College of Physicians collaborated to develop and launch the Faculty of Physician Associates (FPA); the first non-doctor faculty of the college.

## Entry Criteria:

Entry criteria vary by course, but essentially require a good, relevant health science degree with a varying amount of clinical experience. Other routes will be considered by some courses on a more individual basis. There is no entrance exam required at this time.

#### **Education:**

Training to qualify as a physician associate involves completing a 2-year post-graduate qualification (either Post-Graduate Diploma or Masters) followed by successfully completing the PA National Examination, run by the Royal College of Physicians, London. There are currently courses at 36 Higher Education Institutes (HEIs) in the UK, spanning all 4 devolved nations [4], with approximately 1.800 students enrolled in the UK at any one time. Many of these courses have been established within the past 4 years to keep up with an increased demand for healthcare providers within the UK. UK courses vary in their preferred teaching modalities, some promote a traditional lecture-based format whilst other favour problem-based learning.

The content of the courses is largely determined by the Competence and Curriculum Framework (CCF) [5]. The CCF, originally released in 2006, was developed by the Department of Health, in partnership with the Royal College of Physicians and Royal College of General Practitioners. Its aim was to support and standardise physician assistant education in the UK. It was revised in 2012, with the revision including a requirement for PA students to spend time in General Surgery, a specialty not included in the original version of the document.

The 2012 version is still currently being used in UK PA education, although a further review is currently being carried out in line with a new curriculum being developed with the General Medical Council prior to statutory regulation of the profession. The CCF also links to a Matrix of Conditions, also currently being reviewed and updated to meet the current medical landscape.

The PA Schools Council (PASC) is a group which aims to support and aid development of PA courses. It is PASCs aim to have representation from each of HEI providing a PA course to aid in the development of the PA profession. PASC provide an annual conference event to share resources and allow networking and collaboration across different institutions.

## **Financing Education:**

UK PA students privately fund the majority of their training although many receive some contribution towards their fees from Health Education England (HEE), Health Education and Improvement Wales (HEIW) or Health and Social Care Northern Ireland (HSCNI). Funding is also made available in some areas of the UK to aid the HEIs in paying general practices and NHS Trusts for student clinical placement.

## Accrediting/Regulatory Bodies:

Going forward, the GMC will accredit courses; however, this is still in early stages of development.

A public consultation was carried out in 2017 on behalf of the UK Department of Health and Social Care to decide whether Physician Associates, alongside some other professions, should be regulated. The initial results of the consultation were released in October 2018, with both Physician Associates and Anaesthesia Associates being recommended for statutory regulation [6]. It was not announced at that time who the regulator would be, or the intended timeframe. The final piece of the puzzle was announced on 18<sup>th</sup> July 2019, with the General Medical Council (GMC) being put forward as the regulator [7]. Work is going ahead, with a predicted completion date of early 2022. The Faculty of Physician Associates (FPA) is expected to continue as the professional body.

There is currently a managed voluntary register held by the FPA that all PAs are expected to join. This register is available for the public to view [8] and employers are encouraged to make registration an essential employment criterion. This register will be superseded once statutory regulation occurs (with the General Medical Council to hold statutory register from 2022).

#### Recognition

PAs in the UK are recognized by the Department of Health and Social Care (DHSC) as a profession under the Medical Associate Professions (MAPs) umbrella. Once GMC regulated, it is expected that physician associate will become a protected title.

### **Professional Licensure:**

#### Certification Exam

To be recognised as a PA, graduates must take the Physician Associate National Examination (PANE), which contains both written and practical components and is administered by the Royal College of Physicians on behalf of the FPA. Currently, PAs take a recertification examination every 6 years in order to maintain their registration on the FPA Managed Voluntary Register. It is unclear at this time what recertification/revalidation will look like post-GMC regulation, although at current times, PAs are being encouraged to continue to take the recertification examination [9].

## Scope of Practice:

PAs within the UK are trained as generalist practitioners and are able to diagnose diseases and formulate medical management plans. The Competence and Curriculum Framework [5] and Matrix specification of Core Clinical Conditions for the Physician Assistant as published by the UK Department of Health, outlines a list of conditions that PAs are expected to be able to diagnose and manage. This is based on expectations of a newly qualified PA and is expected to expand with clinical experience. UK PAs roles can vary greatly based on years of experience and medical specialty. PAs in the UK work under the supervision of a senior doctor but work autonomously within their scope of practice and agreement with their named supervising physician. National job profiles have been published by NHS Employers for PAs, with those for more experienced PAs still in development [10].

At present PAs are not able to prescribe within the UK. This includes ordering ionizing radiation. In the UK non-regulated professions are unable to prescribe regardless of training or qualifications. Some initial work has started with DHSC to look at the case for PA prescribing, however this will require public consultation after statutory regulation is brought in for PAs. A large study by Vari Drennan et all explored the contribution of physician associates in the hospital setting [11]. A combination of PAs, other health professionals, managers, patients and relatives were interviewed in a study across six acute care hospitals. PAs were also observed in role. PAs were found to contribute positively to the continuity in the team, however found that the lack of authority to prescribe or request ionising radiation were inhibiting factors, with the full potential of PAs unable to be realised.

The FPA has developed an employer's guide to facilitate the employment of PAs [12]

#### Maintaining Role:

Continuing Professional Development (CPD)

There are a number of requirements for UK trained PAs in order to remain on the Managed Voluntary Register, in addition to more usual requirements for healthcare professionals working in the UK, such as an annual appraisal (with a toolkit available for FPA members), gaining Multisource Feedback (MSF) and patient feedback using questionnaires and maintaining up-to-date knowledge through Continuous Professional Development [13]. 50 hours CPD is required per year, on a rolling 5-year cycle to allow for parental leave, sickness and other factors which may have an impact on the ability to carry out meaningful CPD within any given year. This is documented in the RCP CPD diary.

#### **Job Opportunities:**

There are currently approximately 2,200 PAs working in the UK, largely within the National Health Service across both primary and secondary care. Looking at the FPA Annual Census [14], 25% of the profession work in primary care. A further 26% work in either emergency or acute medicine, with an increasing number of medical and surgical specialties employing PAs.

The number of jobs remains unknown, however only 3.6% of those who completed the census selected "seeking work as a physician associate", with the implication being that there are enough jobs for the number of graduates completing courses each year. Jobs are usually advertised on the NHS Jobs website, with some private recruitment companies now being set up to facilitate PA employment.

PAs employed by hospital trusts are usually employed under the NHS Agenda for Change standard terms and conditions, however those in primary care may have differing terms and conditions of employment.

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