

## Physician Associates in Yorkshire and the Humber – Where are they coming from? Where are they going? How is the journey?

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### Introduction

Physician associates (PAs) are a new healthcare professional to the Yorkshire and Humber region.

Whilst there is vast experience of the analogous physician assistants in the US, there is relatively little evidence around how this role will work within the UK. Several groups have reported benefits of the role working in a variety of contexts within the NHS<sup>1-4</sup>.

Little is known about the future of the PA profession in the UK. Whilst there is a central drive to promote PAs working in primary care, the aspirations of UK PAs has not been explored. The background of PAs is likely to heavily influence aspirations, but this is also an area about which there is little evidence. In order to inform these and other questions a series of research projects are being undertaken at the University of Leeds. This report describes preliminary data from these projects relevant to the PA programme review.

### Background – Training Numbers and Retention Rates

INTAKE	HEE Funded Students		
	2015/16	2016/17	2017/18
Leeds University (Sept)	25	25	26
Bradford University (Sept)	-	20	19
<b>West Yorkshire and Harrogate ACS</b>	<b>25</b>	<b>45</b>	<b>45</b>
Sheffield Hallam University (Jan)	25	23	22
Sheffield University (Sept)	-	21	21
<b>South Yorkshire and Bassetlaw ACS</b>	<b>25</b>	<b>44</b>	<b>43</b>
Hull and York Medical School (Sept)	-	32	32
<b>Humber Coast and Vale STP</b>	<b>-</b>	<b>32</b>	<b>32</b>

5 HEIs in the Yorkshire and Humber region are currently training PAs. Table 1 shows numbers accepted onto PA courses by academic year. Table 2 shows the actual and projected output of students per year.

*Table 1. PA students accepted to each of the Y&H regional courses. (Year refers to academic calendar - September-August)*

OUTPUT		HEE Funded Students		
		F'cast	F'cast	F'cast
	2016/17	2017/18	2018/19	2019/20
Leeds University (Sept)	0	15*	23	24
Bradford University (Sept)	0	0	18	18
<b>West Yorkshire and Harrogate ACS</b>	<b>0</b>	<b>15*</b>	<b>41</b>	<b>42</b>
Sheffield Hallam University (Jan)	0	21	19	20
Sheffield University (Sept)	0	0	18	20
<b>South Yorkshire and Bassetlaw ACS</b>	<b>0</b>	<b>21</b>	<b>37</b>	<b>40</b>
Hull and York Medical School (Sept)	0	0	27	30
<b>Humber Coast and Vale STP</b>	<b>0</b>	<b>0</b>	<b>27</b>	<b>30</b>

Table 2. Current and projected number of PA graduates entering the workforce in the Y&H region. NB. These figures account for both attrition that has already occurred and projected numbers of students who will pass the national exam (Pass rate = 85%) \*actual numbers. Data collected January 2018

Up until October 2017 there were around 5 PAs working across the Yorkshire and Humber region. In October 2017, the first cohort of 15 PAs trained at the University of Leeds passed the national PA exam. All 15 were employed within the region – 14 working in preceptorship schemes at either Leeds Teaching Hospitals Trust or Calderdale and Huddersfield Foundation Trust and 1 in primary care in Sheffield. As of November 2017, the region was a net importer of PAs with around 25 PAs working across the region (20 at LTHT and CHT combined of whom 18 were newly qualified).

The second cohort of Yorkshire and Humber PAs trained at Sheffield Hallam University qualified in February 2018. Of these, approximately half are now employed within the region (the majority of retained PAs from this cohort working in primary care in South Yorkshire). Around half of the February 2018 cohort left the region. Feedback from students and SHU faculty suggests that one of the main drivers for the poor retention of this cohort was paucity of local employment opportunities in late 2017. Although several local positions, notably in Barnsley and Mid Yorks, were advertised in February/March 2018, most of the recently qualified PAs had already accepted alternative offers prior to release of these posts.

It is projected that 86 PAs will qualify from Yorkshire and Humber HEIs and be ready to work in October 2018. Feedback from faculty across the HEIs is that employment opportunities in the East, Coast and Vale, and South Yorkshire LWAB footprints are positive. Concerns have been raised about a paucity of advertised positions, particularly in primary care, in the West Yorks and Harrogate LWAB footprint. As a result, the WYH LWAB have agreed to match the financial support to primary care PA preceptorships offered in other areas of the region.

### Where are they coming from?

The following graphs and tables report the demographic data of the 268 PAs who enrolled on PA courses at the 5 HEIs in the Yorkshire and Humber region between 2015 and 2017. This data is relevant to both education and training as well as future workforce planning.

	20-24	25-29	30-34	35-39	40+
Number	<b>181</b>	<b>52</b>	<b>12</b>	<b>9</b>	<b>14</b>
% of total	<b>68</b>	<b>19</b>	<b>4</b>	<b>3</b>	<b>5</b>

Table 1. Age Profile

	Yorkshire	North west	East Midlands	South East	London	South West	West Midlands	East	North East	N. Ireland	Wales	Scotland
Number	<b>136</b>	<b>38</b>	<b>26</b>	<b>15</b>	<b>14</b>	<b>9</b>	<b>9</b>	<b>8</b>	<b>4</b>	<b>4</b>	<b>3</b>	<b>2</b>
% of total	<b>51</b>	<b>14</b>	<b>10</b>	<b>6</b>	<b>5</b>	<b>3</b>	<b>3</b>	<b>3</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>

Table 2. Home Region

	Male	Female	Other/Prefer not to say
Number	<b>78</b>	<b>189</b>	<b>1</b>
% of total	<b>29</b>	<b>71</b>	<b>0</b>

Table 3. Gender Profile

	Undergrad	Postgrad	Doctorate
Number	<b>222</b>	<b>43</b>	<b>3</b>
% of total	<b>83</b>	<b>16</b>	<b>1</b>

Table 4. Academic Background

	Biomedical Science	Clinical Sciences	Medical Sciences	Biology-related	Chemistry-related	Forensic Science	Physiology/ Sports Therapy-related	Psychology	Pharmacy/ Pharmacology	Healthcare Science	Combined	Other
Number	<b>125</b>	<b>16</b>	<b>14</b>	<b>29</b>	<b>10</b>	<b>5</b>	<b>14</b>	<b>6</b>	<b>5</b>	<b>6</b>	<b>17</b>	<b>21</b>
% of total	<b>47</b>	<b>6</b>	<b>5</b>	<b>11</b>	<b>4</b>	<b>2</b>	<b>5</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>6</b>	<b>8</b>

Table 5. Degree by subject area

	Paid	Voluntary	None	Unknown
Number	<b>113</b>	<b>69</b>	<b>32</b>	<b>54</b>
% of total	<b>42</b>	<b>26</b>	<b>12</b>	<b>20</b>

Table 6. Healthcare experience prior to enrolling



Healthcare Assistant	Biomedical Scientist	Support Worker	Pharmacist/ Pharmacy Technician	Nurse	Ophthalmic practitioner	Therapist	Dentist/ dental assistant	Surgical specialities	Other
<b>29</b>	<b>21</b>	<b>18</b>	<b>5</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>23</b>

Table 7. Paid roles

Key points arising from this data:

- 71% of PAs are female. The gender mix is similar to that seen in biomedical sciences and medicine. This is unsurprising given that around half of PAs are biomedical science graduates and that the PA studies course is likely to attract individuals with a similar motivation to medicine applicants.
- 87% of PAs are under 30 at the time of embarking on this as their career. This has significance in term of potential return on investment in training if retention can be maximised.
- The majority of PAs training at local HEIs are originally from Yorkshire. They have chosen to undertake post graduate studies in the region. This suggests that they may be amenable to remaining in the region if the employment opportunities are favourable.
- 17% of locally trained PAs enter the course having already undertaken postgraduate studies. This has potential impact as, under the new national funding structure, there is minimal financial support for PA students (£2,500/year) and course costs must be met by students

(£18-20,000 based on local course projected costs). Whilst this is likely to reduce applications across the board, students who have already undertaken postgraduate studies would not be eligible for a postgraduate loan and therefore would be significantly financially disadvantaged. As such, applicants with the highest academic qualifications will not be eligible for financial support and may be less likely to apply.

- The majority of PA students have existing healthcare experience, at least 42% in paid roles and 26% in voluntary roles. This suggests that students have experience of the challenges of working within the NHS. This experience may facilitate retention. This data does however counter the view of physician associates being an entirely new professional group adding to the NHS skills mix and it would appear that a significant proportion of PAs are existing employees, re-framing the view of the PA role as a mixture of new workforce and upskilled existing NHS staff.

### Where are they going?

Nationally 26% PAs are working exclusively in primary care<sup>5</sup>. The Yorkshire region initially lagged behind in this respect but the recent creation of several PA posts in primary care in South Yorkshire has redressed this balance with around a quarter of PAs in Yorkshire now working within primary care.

Little is known about the career plans of PAs. A survey of the first cohort of 18 PAs starting work in secondary care in the Yorkshire region was conducted in October 2017. Eleven responses (61%) were received. All respondents indicated that positive experiences during student placements influenced their choice of job. Respondents had a variety of views regarding future career plans (Figure 1).

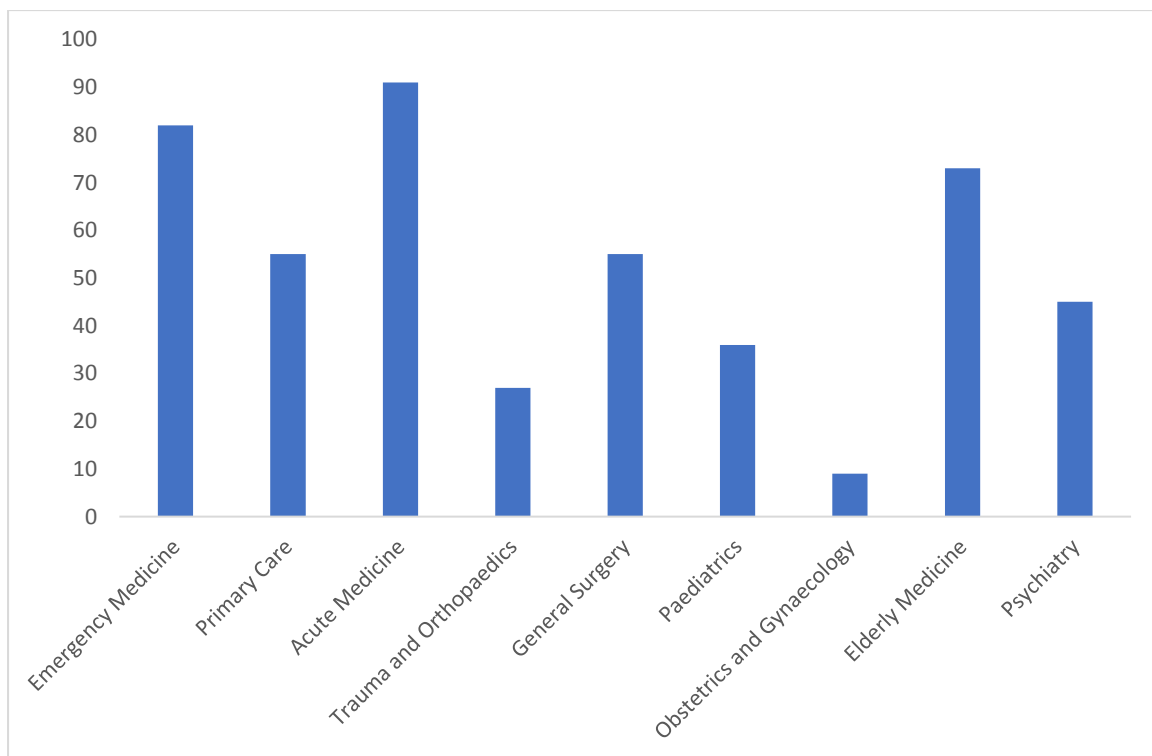


Figure 1. Percentage of PAs that would anticipate being satisfied, 5 years post qualification, with a career in each speciality

The same group of PAs were re-surveyed after working in secondary care for 6 months about their views of working in primary care. 10 responses were received (56%). Results are shown in in Table 8.

Table 8. Physician associate views of primary care after 6 months of working in secondary care

	<b>Strongly Agree</b>	<b>Agree</b>	<b>Neutral</b>	<b>Disagree</b>	<b>Strongly Disagree</b>
<b>My experience of working in a hospital has made me more interested in working in general practice</b>	1	5	2	2	0
<b>My experience of working in a hospital has made me better prepared to work in general practice</b>	3	6	1	0	0
<b>I would like to work in general practice in the future</b>	4	2	3	1	0
<b>I do not feel that I have adequate experience to work in general practice</b>	1	4	2	3	0
<b>I would apply for a job in general practice within the next 12 months if the right position was available</b>	3	1	2	2	2
<b>I have no interest in general practice</b>	0	1	1	2	6

PAs also indicated in free texts that they had other concerns about working in general practice including limited supervision and a perception of lack of support/team working.

### **How is the journey?**

Physician associates differ from other healthcare professions in that although they are considered to be fully qualified at the point of registration, they have mandated ongoing CPD requirements, their professional registration being dependent on maintaining a CPD diary of at least 50 hours per year and on passing a recertification exam every 5-6 years<sup>6</sup>.

The experience and training requirements of qualified UK PAs is an area that has received little attention within literature or formal reports. What data is available suggests that on the whole PAs are satisfied with their roles<sup>5,7</sup>.

The first cohort of 18 newly qualified PAs in Yorkshire were surveyed about their expectations of the working and learning environment before starting work and were subsequently re-surveyed about their experiences 6 months after commencing their initial placements. Response rates were 61% and 56% respectively. The following section outlines the results of these surveys.

Respondents were asked which adjectives described their expectations or experience of the workplace. Results are presented in Figure 2.

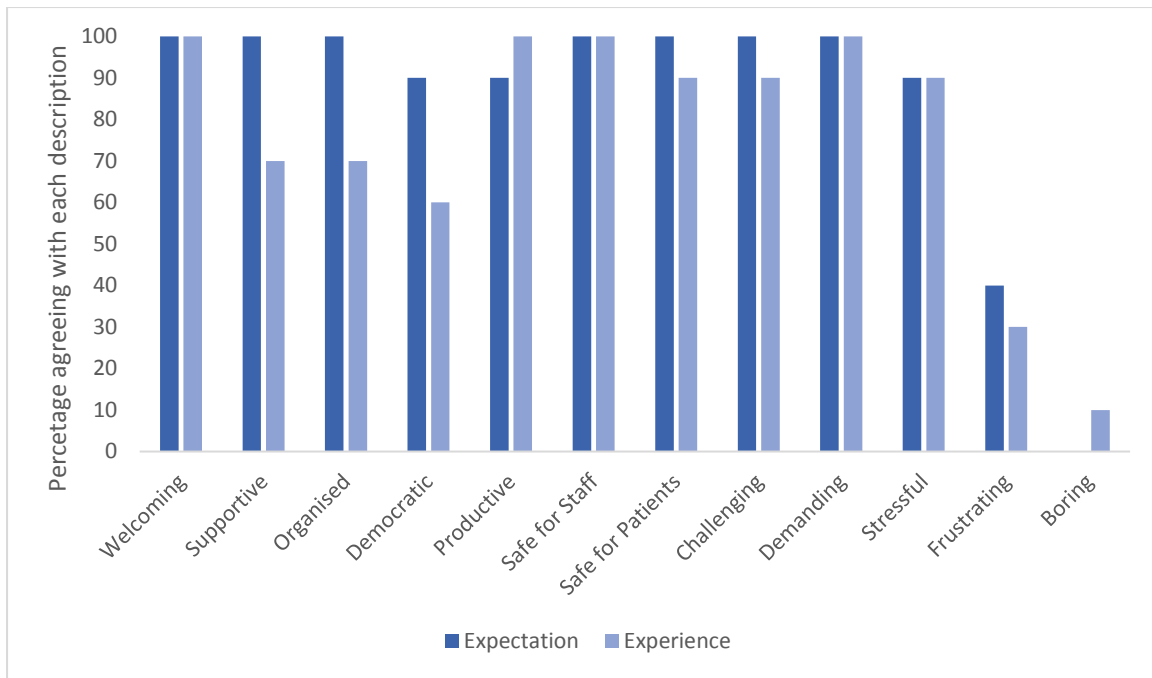


Figure 2. Physician associate expectations (before commencing their role) and experiences (after 6 months in post) of the workplace

PAs were also asked to describe their initial expectations and subsequent experiences of workplace based challenges. Results are presented in Figure 3.

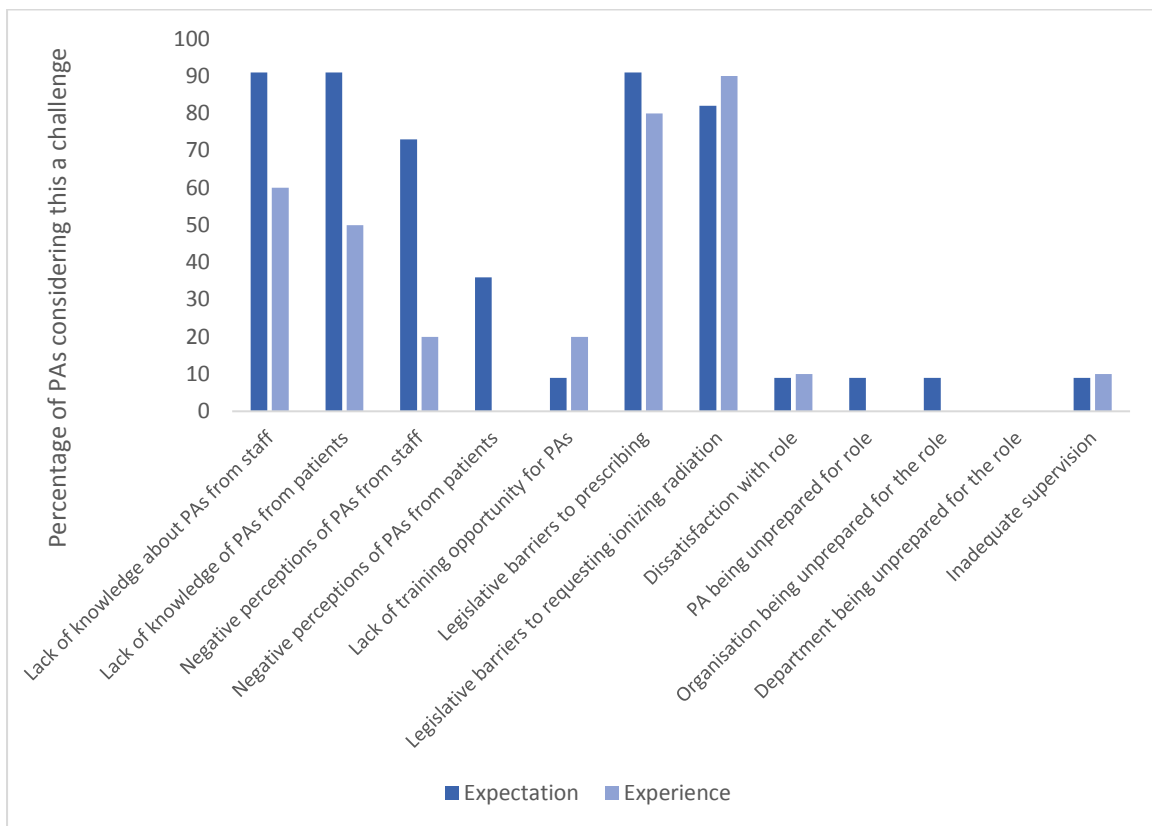


Figure 3. Physician associate expectations (before commencing their post) and experience (after 6 months in a qualified PA role) of challenges in the workplace

PAs were asked before starting work and subsequently 6 months later to what extent they felt that they had been prepared for practice within different domains of the PA role at the time of qualification. Results are presented in Figure 4.

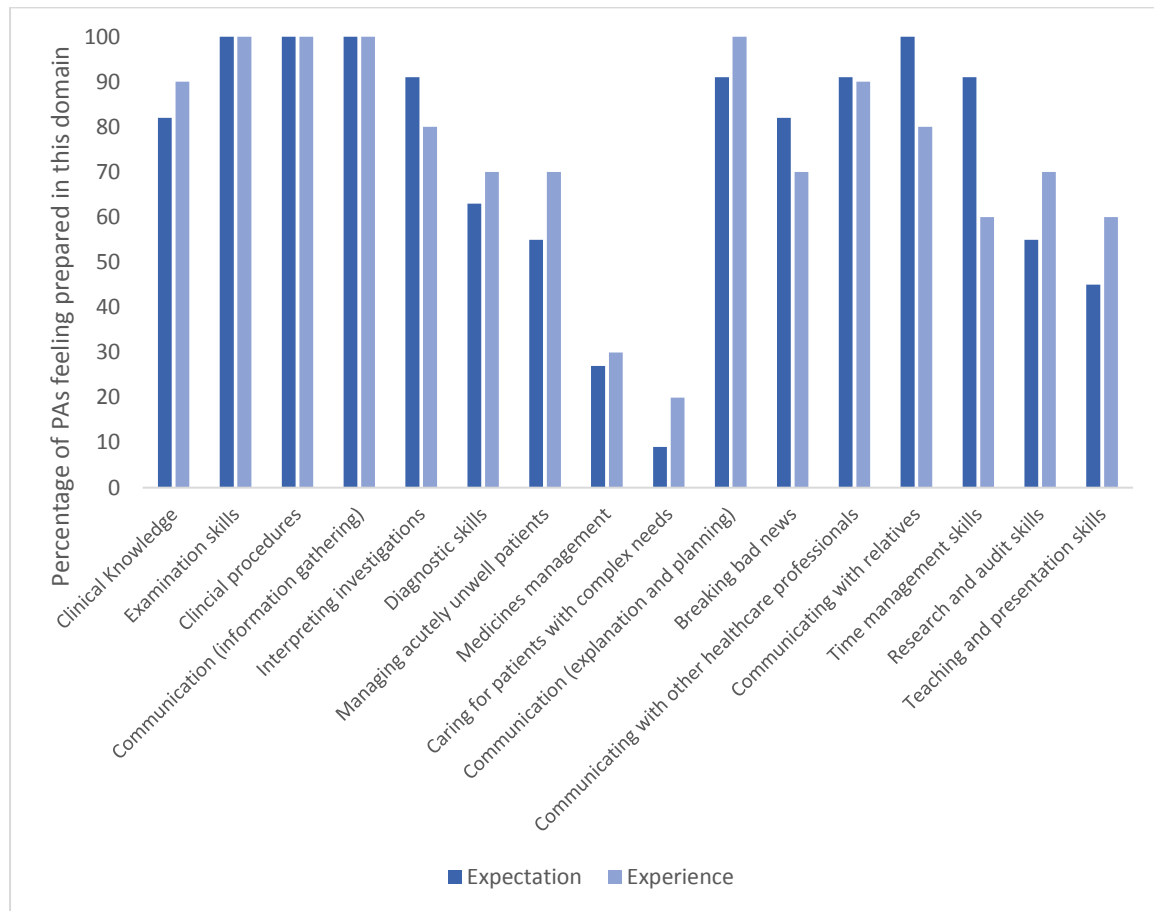
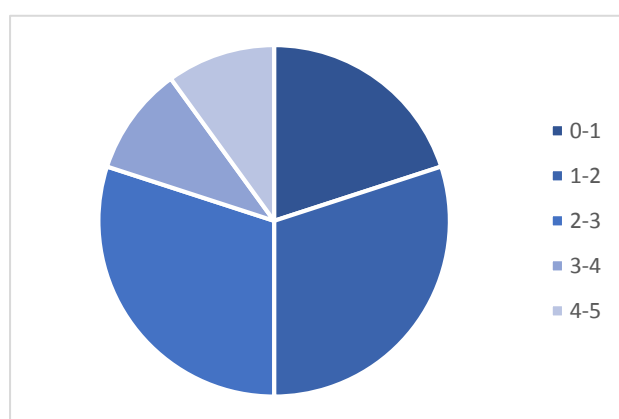


Figure 4. PA perceptions of preparedness for practice at the point of qualification (expectations) and their subsequent retrospective views of this 6 months after starting their role (experience).



PAs were asked after 6 months in post, about their educational experiences and opportunities. Time spent each week attending organised teaching was variable. Responses are indicated in Figure 5.

No PAs reported regularly attending foundation doctor teaching. Two indicated that they had attended dedicated advanced practitioner teaching. Most were aware of dedicated PA teaching although the frequency of this varied between trusts.

Figure 5. Number of hours per week spent in organised teaching

PAs responses about the quality and appropriateness of educational provision in their roles are indicated in Figure 6.

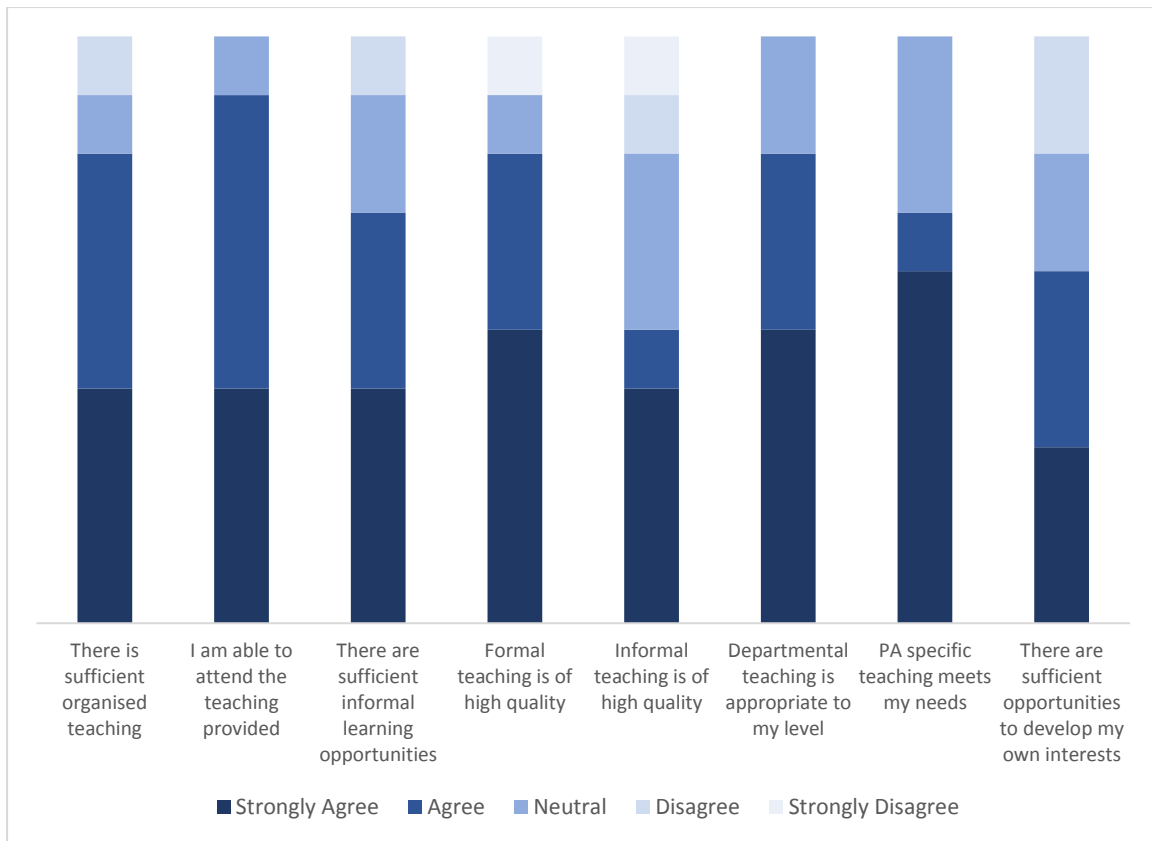


Figure 6. Extent to which respondents agreed with statements about their educational opportunities after 6 months in post

## Summary

Physician associates are a new addition to the NHS in the Yorkshire and Humber region however with over 100 students per year graduating from local HEIs, they have the potential to make a significant contribution to the future workforce. This report summarises data collected from a number of research projects based at the University of Leeds pertaining to the recruitment, retention and training of Yorkshire and Humber PAs.

The post-qualification data in particular is small and was collected as part of a mixed methods study to inform qualitative data collection tools, the results of which are currently being analysed. The data reported here is not considered to be representative of all physician associate opinion or experience but is suggested as a starting point for discussion in the absence of comprehensive data.



## References

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