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**Are you interested in supporting physician associates in your practice?**

**Physician Associate Training – Primary Care Placements**

**The Physician Associate (PA) is defined as someone who is:**

“A new healthcare professional who, while not a doctor, works to the medical model, with the attitudes, skills, and knowledge base to deliver holistic care and treatment within the general medical and/or general practice team under defined levels of supervision”

**![question_mark[1]]()**

**Frequently asked questions**

***When will students be out on placement?*** A student is allocated to the practice placement by the Training Hub and HEI. Placements can vary from 6-8 weeks, but the placement will always be made following agreement with the practice clinical team/practice manager to ensure the practice can accommodate the student.

***Which university will my student belong to?*** The student will come from a university within your local area; your practice will usually be aligned with a university which will be determined when your practice opens up as a placement. This is currently University of Chester. There will be an academic link attached to your practice that can support you and will conduct the initial audit, in conjunction with the Placement Development Lead.

***How much time will I be expected to spend with my student?*** For purposes of indemnity, the student should be supervised at all times when delivering care, but this can be by any registered practitioner. It is imperative that all patients seen by PA students are reviewed by the GP supervisor. The amount of direct supervision with the GP supervisor will vary. Usually they will need less to start with due to sitting in with other team members, more in the latter stages of the placement because the student will be seeing patients themselves and then presenting/discussing with the GP.

**Who should they see on placement?** The make-up of primary care teams can vary widely. Part of the time on placements should be devoted to meeting the members of the team, understanding their roles and how they communicate with each other to meet the needs of their patients.

Members of the team can also get involved in some of the assessments that the students need to complete on placement, such as skills competency assessments or multisource feedback on professionalism and team working.

***What will learners be able to do?*** Physician Associates are trained as ‘generalists’ and have the potential to undertake a wide range of roles under the supervision of a GP including:

* Telephone Triage
* Open Surgery, managing their own lists
* Chronic Disease Management
* Ordering Investigations
* Home Visits
* Liaison and referrals with other teams and services
* Procedures such as coil fittings, contraceptive implants
* 6/52 mother and baby checks
* Minor Surgery
* Complete reports: Holiday cancellation forms, DWP forms and Insurance medicals
* Assist GP (e.g. HGV exams, DVLA forms etc. which are then signed by the GP)

**How much time do PAs have with a patient per appointment?** This is dependent on a PA’s experience. If registrars with 8 years’ experience (five years of medical school, two foundation years and an ST year) start on 30-minute appointments, then it follows that new graduate PAs should be given similarly reasonable times. They may also need time to get signatures for medications or imaging. Appointment times should decrease every few months in the beginning – with negotiation and based on a PAs comfort and experience

Over time, PAs should have 10-minute appointments, but how the individual surgery deals with signing medication/imaging will affect times. If a PA is required to discuss medication, but only has a 10-minute appointment, then in essence they are being asked to see patients faster than a doctor, as a PA has to wait to speak about the medication with their supervising GP within the 10-minute appointment time.

**Is one GP assigned for providing prescriptions for a PA or is this done by the next GP with Free time?** This depends on how the surgery works and if they discuss the medications. Ideally, this should be the next free or duty doctor. A new PA should always discuss every medication recommendation until the doctor is completely happy with the medication proposals.

**Do any PAs do minor surgery/coil insertion/specialist clinics?** Some PAs run the minor surgery weekly clinic but only if the one GP with up-to-date skills is in the building. The clinic cannot run if the appropriate doctor is not in the building. This is a safety issue.

**What is the difference between a PA and an advanced nurse practitioner (ANP)?** A PA has a biomedical science background, and is trained in the medical model specifically for the position in medicine. The PA is not an extended practitioner. They do not work to set protocols and can see a wide variety of undifferentiated patients.

An ANP has trained in nursing and has usually spent many years in healthcare learning the skills for the job. Completing courses to advance their knowledge. They tend to work in a specialist area and have a mixed skill set.

ANPs tend to be able to prescribe. PAs have the requisite knowledge and skill to prescribe, although lack of statutory regulation currently renders them unable to do so. There are enough patients in the system to enable all professional groups to work in a complementary way to deliver high quality patient care

**Is one GP assigned for cases that need discussion with a PA or is this decided dependent on which GP is next available?** PAs should be able to discuss patients with any GP. If a surgery runs a duty doctor system, that person should be the supervisor for the session.

**Taken from ‘An Employers Guide to Physician Associates’**

***What about COVID-19?*** Prior to placement, all students will have received a risk assessment by their university. It is recognised that we currently have new ways of working and it is useful to expose students to virtual consultations, telephone consultation, e-consult, group video consults as well as face to face consults. Supervisors can be creative in their learning environments.

## What are the benefits?

There is a student placement tariff, of approximately £510 per week pro rata, which will be paid retrospectively to the practice. You are supported throughout by the university and your local training hub, specifically, you will be allocated a placement development lead that can answer any questions or offer support.

***Who to Contact***

***Enhanced Training Hub Co-ordinator:*** *Sam Sweetnam*

***Email:*** *etp.admin@nhs.net*

***Enhanced Training Hub Clinical Lead:*** *Dr Lindsay McClelland*

***Email:*** *Lindsay.mcclelland1@nhs.net*

*Physician Associate Programme Lead (Health Education England): Jacqui Baines*

***Email:*** *jacui.baines@hee.nhs.uk*

***The Primary Care Academy is made up of 6 Enhanced Training Hubs based around the Cheshire and Merseyside area, all hosted within GP Practices. We also oversee paramedic and student nurse placements. Your local hubs are detailed below.***

***Please contact them for further information or go to our website.***

***Liverpool Training Hub***

*Brownlow Group Practice70 Pembroke Place, Liverpool, L69 3G*

*Liverpooltraininghub@livgp.nhs.uk*

*Placement Development Lead- Rachel Cross*

***Sunlight Group Practice***

*Parkfield Medical Centre, Wirral CH62 5HS*

*Jennine.edge@nhs.net*

*Ethwirral.admin@nhs.net*

*Placement Development Lead- Louise Smyth*

***Bollington Medical Centre***

*Wellington Rd, Bollington, Macclesfield SK10 5JH* *Falan.barton@nhs.net*

*Placement Development Lead- Heather Glover*

***Grosvenor Medical Centre*** *Grosvenor St, Crewe CW1 3HB* *Michelle.boote@nhs.net*

*Placement Development Lead- Lorraine Hughes*

# *Spinney Medical Centre*

*23 Whittle St., St Helens WA9 3EE* *Spinney.etpadmin@nhs.net*

*Placement Development Lead- Lindsey Johnson/Susan Burgess*

***Southport & Formby Health***

*2 Leamington Rd, Southport PR8 3LB* *Etp.admin@nhs.net*

*Placement Development lead- Maggi Bradley*