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# Physician Associates in Primary Care

INTRODUCTION

Physician Associate Preceptorships are an initiative from NHS England (formerly HEE) to support newly qualified [[1]](#footnote-2) physician associates along with those who are new to Primary Care having previously worked elsewhere. It enables them to work in a supportive environment within a structured programme as they start their career in Primary Care and / or transition from student to practitioner.

Aims:

* Allow the physician associate time to develop skills, knowledge and experience with support and supervision.
* Provide direction and focus.
* Gives clear guidance to newly qualified PAs and General Practices.
* Provide employers with the opportunity to employ and develop newly qualified PAs with financial assistance and to gain an understanding of how the new roles can be deployed.
* Increase the proportion of PAs recruited to and retained in Primary Care.

Benefits of the preceptorship physician associate programme

* Develops confidence in newly qualified professionals.
* Preceptees feel like they belong and are valued.
* Provides enhanced patient care and improved experiences.
* More confident and skilled staff.
* An increase in physician associates staying and working in the Northwest post-qualification, which will greatly benefit the Northwest in terms of patient care and waiting times for appointments.
* Employing a PA does not mitigate the need to address the shortage of GPs or reduce the need for other practice staff, but physician associates can perform a valuable role as part of the extended primary care team. There is scope for them to take some pressure off GPs by performing some defined clinical tasks.

NHSE- Physician Associate Preceptorship Criteria

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| --- | --- |
| 1 | The preceptorship programme will be undertaken for a minimum of 1 year (whole time equivalent) and must entail a minimum of 50% (or 6 months’ full time equivalent) being spent in Primary Care. |
| 2 | The Preceptorship is only being offered to  (a) a PA who is commencing a programme in the first twelve months of practice after first gaining registration on the national register or  (b) a PA taking up their first post in primary care since gaining registration. This includes the transition of PAs from secondary care. |
| 3 | The Employer must have read, understood, and be prepared to implement the guidance within the Faculty of Physician Associates (FPA) document ‘*Employers’ Guide to Physician Associates*  [(attached)](https://www.fparcp.co.uk/employers/guidance) |
| 4 | The weekly timetable must include at least 1 dedicated session for education. |
| 5 | The PA preceptee must work under GP clinical supervision during their day-to-day clinical practice. They must also have access to a Clinical Supervisor to support their professional development and undertaking of any portfolio-based assessments (GP CS training available if not accredited at time of appointment).  The PA must have a Clinical Supervisor (CS) who has completed formal clinical supervision training such as a PG Cert in Medical Education. It is recognised that other bodies, such as Royal Colleges, Universities, and other education providers also provide training which individuals may be able to use to demonstrate that they have met the required standards. If you are unsure, please get in touch.  The GMC define a CS as  “a trainer who is selected and appropriately trained to be responsible for overseeing a specified trainee’s clinical work and providing constructive feedback during a training placement.”  This is different to a GP or consultant who supervises a qualified PA clinically as required by the regulations. |
| 6 | The Preceptee must have access to a trained mentor for the duration of the Preceptorship. The designated mentor must not hold the roles of a line manager, clinical supervisor, or educational supervisor, for the individual, and should not have direct involvement in their day-to-day responsibilities. It is recommended that the mentor is from a different department or organisation. The employing practice / PCN must agree and adhere to the attached mentorship criteria. |
| 7 | If being employed by a PCN, PA Preceptees must work in no more than 2 practices for the first 6 months of their Preceptorship year. |
| 8 | PA Preceptees must have a suitable induction period, an induction meeting with their supervisor, a mid-point and an end of programme review with their supervisor (regardless of whether they have been a PA student on placement with the practice). |
| 9 | The programme must use suitable supportive records of the PA Preceptee’s progress. For example, the FPAs ‘First Year Post Qualification Documentation’ which can be accessed on [www.fparcp.co.uk/employers/guidance](http://www.fparcp.co.uk/employers/guidance) |
| 10 | PA Preceptees must take part in the employer's annual appraisal system. |
| 11 | You should offer an approved structured development plan with clear objectives, goals and a shared understanding around how the practice will support the preceptee to gain the experience and skills required. This could be from a local HEI or could also be in-house or in-network. |
| 12 | The preceptorship programme will set out expected outcomes for the PA Preceptee in the form of competence acquisition or a brief curriculum which may be locally derived but based on established national guidance. This can be found within the FPA document; *First Year Post Qualification Documentation.* [*https://www.fparcp.co.uk/employers/guidance*](https://www.fparcp.co.uk/employers/guidance) |
| 13 | The preceptorship programme must enable the PA Preceptee to engage in multi-professional learning activities with protected time to ensure this. E.g. your internal clinical meetings. |
| 14 | Where the PA Preceptee’s objectives include a further course of study, this should usually be funded from the NHSE support payment. This could be up to the cost of a postgraduate certificate qualification if appropriate for the PA Preceptee and the service context; this funding should be used flexibly to meet the needs of the preceptor. |
| 15 | Individual post-holders will be expected to complete and maintain all the requirements of the UK PA Managed Voluntary Register (PAMVR) or subsequent register. |
| 16 | At the start of employment, newly qualified PAs in Primary Care should have 30-minute patient consultation time allocation with a debrief after each patient. This should be reviewed between 3-6 months and the consultation time adjusted as appropriate. |
| 17 | Employers must consider a rota/job plan with a maximum of eight patient-facing clinical sessions a week for the first 6 months of the Preceptorship programme. |

**Once the below form is completed, please return to** [**england.physicianassociates.nw@nhs.net**](mailto:england.physicianassociates.nw@nhs.net)

**DON’T FORGET …**

|  |  |
| --- | --- |
| A green check mark in a square  Description automatically generated | to complete all sections & answer all questions |
| A green check mark in a square  Description automatically generated | to submit this form as early as possible in the preceptorship year. |
| A green check mark in a square  Description automatically generated | to type or write clearly.   (Do not amend the form or send scanned or PDF copies) |

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# Physician Associates in Primary Care

# Preceptorship Support Funding Application Form

|  |  |
| --- | --- |
| Main Practice Name & Address |  |
| Who is your Local Training Hub? |  |
| Lead GP name & email address |  |
| Practice Manager name  & email address |  |
| Have you previously hosted a student PA on paid placement | YES 🞏 NO 🞏 |
| If NO –  is this something you are interested in? (the current tariff is £111 per student per day) | YES 🞏 NO 🞏 |
| Date of Application |  |
| Preceptorship Start date |  |

**Physician Associate Preceptee Information**

You must have written consent from the PA before sharing this information with NHS E. Please make the PA aware that this information may be shared with funding partners / stakeholders and delivery agents such as the Enhanced Training Hubs.

|  |  |
| --- | --- |
| Name of PA Preceptee: |  |
| **Confirm** that at least 50/% of the week (or 6 months of the Preceptorship year) will be spent working in Primary Care |  |
| Is the Preceptee…? | newly qualified 🞏 or new to Primary Care 🞏 |
| Preceptee email address: |  |
| Name of HEI attended by PA |  |
| Year the PA finished their university programme |  |
| **State** PA Preceptee’s PAMVR number  (PA Managed Voluntary Register) |  |
| Please **confirm** that indemnity is in place for the PA Preceptee.  Physician associates working in general practice benefit from the same state-backed clinical negligence indemnity as their general practice colleagues*.* There are two general practice indemnity schemes,: CNSGP & ELSGP. Whilst cover under both schemes is automatic, with no need to register and no need to pay, there are some things that the schemes do not cover and physician associates will need private indemnity cover for these.  See [www.fparcp.co.uk/employers/guidance](http://www.fparcp.co.uk/employers/guidance) for more details. |  |
| Is the PA Preceptee working full time or part time? If part time, is the PA preceptee also working in secondary care for part of the week? |  |

**Please confirm that you understand and meet all the criteria outlined by NHS E including the requirement for least one dedicated education session per week and no more than eight  
patient-facing clinical session in any given week**  
  
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**Email of person who completed this form and should be contacted in event of a query.**

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**Employer information**

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| --- | --- |
| **Overview** | |
| Name and address of the employing organisation. |  |
| Is the PA Preceptee being employed to work across a Primary Care Network as part of the NHSE ‘Additional Roles Reimbursement Scheme’? (ARRS)  *If yes, please include the name of your PCN & the number of practices within its geography*. | YES 🞏 NO 🞏  Name of PCN   Number of practices |
| **Clinical Supervision** | |
| Name, job role, and email address of the physician associate preceptee’s  Clinical Supervisor. |  |
| Please detail the Clinical Supervisor's working pattern and availability. |  |
| Please provide details of the Clinical Supervisor training undertaken by the Named CS, and the date of this training. **(See note 5 above)** |  |
| **The Preceptorship Year** | |
| Please **confirm** you will be implementing the guidance within the Faculty of Physician Associates (FPA) document ‘*Employers’ Guide to Physician Associates*’? |  |
| Is the PA attending a professional development programme (e.g. Training Hub)   If you answered YES- provide details | YES 🞏 NO 🞏 |
| **Confirm** the Preceptee has access to a trained mentor for the duration of the Preceptorship and you have read and are implementing the updated mentor requirements |  |

1. Newly qualified means since qualifying the PA has worked clinically for less than 12 months. [↑](#footnote-ref-2)