



Ms Alexandra Kayat

President
NZ PA Society
Physician Associate (PA)
Ropata Medical Centre,
Lower Hutt



Dr Sarah Painter

General Practitioner
Ropata Medical Centre
Lower Hutt

Sunday, August 11, 2019

(Plenary)

8:30 - 8:50 Physician Associates in New Zealand: Past, Present, Future

Physician Associates in New Zealand Past, Present, & Future

Alexandra Kayat, BSc, MPAS, PA-C

President, New Zealand Physician Associate Society

Physician Associate, Ropata Medical Centre

Dr. Sarah Painter, BSc, MBChB, Dip O&G, FRNZCGP

GP, Ropata Medical Centre

What is a Physician Assistant/Associate (PA)?

- Medical professionals who practice medicine on physician-led healthcare teams
- PAs treat patients autonomously and collaborate with doctors when necessary



Brief History of PAs in the USA

- 1940s - Shortage of Primary Care Physicians
- 1965 - First class of PAs - Navy Hospital Corpsmen with extensive medical training during their service
- 1970s -
 - Medical community and federal acceptance
 - Recognized by American Medical Association (AMA)
 - National Commission on Certification of Physician Assistants established
 - Accreditation recommendations for education



What can PAs do?

- Obtain medical histories and perform physical exams
- Order and interpret lab tests
- Diagnose and manage diseases
- Perform minor surgery and assist in major surgery
- Monitor and manage hospital inpatients
- Patient education
- Scope of practice and responsibilities correspond to supervising physicians' practice
- Prescribe medications (*Not in New Zealand*)



What types of patients do PAs see?

- PAs can see any patients, regardless of complexity or acuity, as long as it is within their scope of practice, correlating to their training and experience, and correlating to their supervisor's scope of practice
- PAs share the workload and do not pick and choose “the easy patients”
- PAs are trained to know their limits and ask for assistance when needed





How are PAs trained in the USA?

- Very intensive 2-3 year Master's degree (year round, full time study)
 - To be a candidate for PA school, one must have:
 - Bachelor degree
 - Pre-med prerequisite courses
 - Min. 2,000 hours direct patient contact experience
- PAs are trained as ***generalists*** in the ***medical model***
- Over 2,000 hours clinical rotations
- Taught to be versatile & collaborative



Certification - the “C” in PA-C

- ***National board certification exam*** through the National Commission on Certification of Physician Assistants (NCCPA)
 - Rigorous 5 hour exam covering general medical and surgical knowledge.
- To maintain certification:
 - 100 hours of CME every 2 years
 - Recertification exam every 10 years



What's the difference between a PA & NP?

At the practice level, there are likely more similarities than differences between PAs and NPs.

However, there are two key differences:

1. PAs are educated in general medicine, which offers a comprehensive view of all aspects of medicine. PAs work in collaboration with doctors.
2. "PAs are trained to practice medicine using a curriculum modeled on medical school education. NPs are trained in the advanced practice of nursing"

AAPA.org





THERE ARE CURRENTLY
131,000
CERTIFIED PAs,
a 64% INCREASE
since 2010.

DEMAND IS HIGH
FOR RECENTLY CERTIFIED PAs



U.S. News & World Report ranked the PA profession as #3 in the "100 Best Jobs" list of 2019.

TO BECOME CERTIFIED, PAs MUST:

GRADUATE
from an accredited
PA program
(master's level)

PASS
the PA
National
Certifying Exam

**PAs RETAIN CERTIFICATION
THROUGHOUT THEIR CAREER**

PAs:

Earn 100
continuing medical
education (CME)
credits every 2 years

Pass a
recertification
assessment
every 10 years

**MEDIAN
AGE OF
PAs IS**

**38
YRS**

68% OF
PAs ARE
WOMEN

**13%
OF PAs
WORK IN
2 OR MORE
CLINICAL
POSITIONS**



**Number of Certified
PAs by State**



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**23% OF PAs
COMMUNICATE
WITH PATIENTS
IN A SECOND
LANGUAGE**

NCCPA
Certification Foundation
www.nccpa.net
www.PAsDoThat.net
f t i n y

Forbes

2014- #1 Best Master's degree

2015- #1 Most Promising Job

**2018- #3 Best job, based on
education requirements, median salary
and job satisfaction**

**Now- #1 most promising job for
millennials**

Medical Exhibition



Rural PAs in the USA

“PAs continue to enter the rural workforce at *higher rates than primary care physicians* and continue to make large contributions to the care of underserved rural populations. Over 7,000 new PAs enter the workforce each year (compared to about 20,000 U.S. medical graduates) and constitute a substantial potential resource for rural populations experiencing the effects of health provider shortages.”

Larson EH, Andrilla CHA, Morrison C, Ostergard S, Glick A. Which Physician Assistant Training Programs Produce Rural PAs? A National Study. Policy Brief #154. Seattle, WA: WWAMI Rural Health Research Center, University of Washington, Feb 2016.

South GP CME General Practice Conference & Medical Exhibition



PAs are also practicing medicine in....

- Canada
- UK
- Netherlands
- Australia
- Germany
- Afghanistan
- India



- Israel
- Ghana
- Liberia
- Saudi Arabia
- South Africa
- **New Zealand**

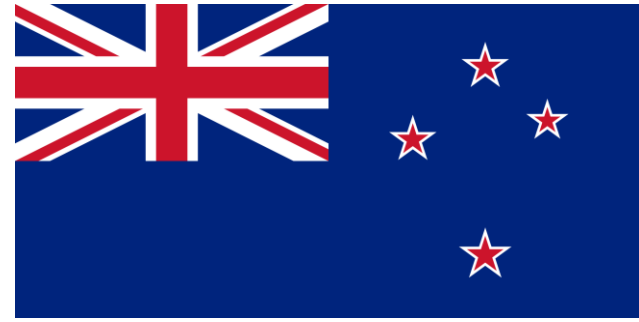
With similar roles in many other countries...

United Kingdom



- Pilots starting in 2002 with US-trained PAs
 - Pilot in England arose specifically out of the difficulties recruiting GPs to deprived communities
 - PAs safe, well received by patients and by other professions
- 600 PAs, 1600 student PAs (2018 FPA census)
- 31 PA programs with 3 upcoming programs
- National exams and a managed voluntary register
- Oct 2018 - Government announced plans to regulate Physician Associates
- **July 2019 - General Medical Council (GMC) to regulate PAs**

Why New Zealand? Why Now?



- 47% of the existing GP workforce intends to retire within the next 10 years - The RNZCGP's 2018 workforce survey
 - The RNZCGP -10 recommendations submitted to the government's Health and Disability System Review
7. Investigate and remedy the current shortfall of vocationally registered general practitioners, rural hospital doctors and other health professionals in order to meet current demand for services.

NZ PA Pilot Demonstrations



2010 - 2011



- Two PAs - Surgical/Hospitalist project - Middlemore Hospital



2013 - 2015



- Seven PAs - primary care setting & rural hospital ED - Tokoroa, Hamilton, Taneatua, Gore

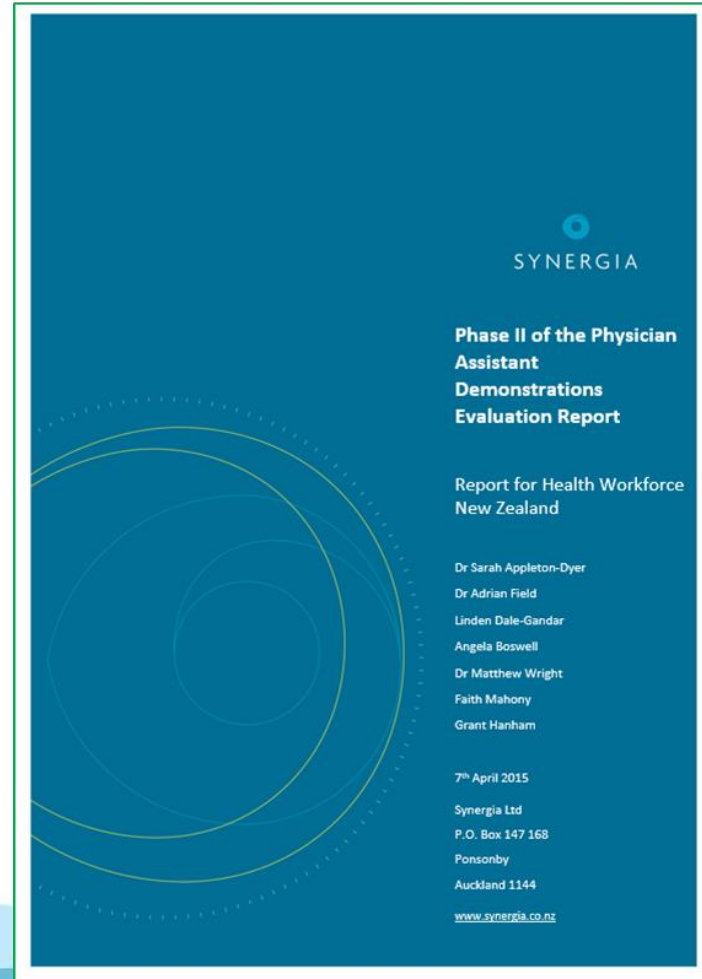


Science & Medical Exhibition

Synergia Report - HWNZ

Evaluation Method

- Two sets of site visits to each of the demonstration sites to conduct key stakeholder interviews, supplemented by some telephone interviews; a total of 60 interviews were conducted.
- Staff and patient surveys at each site; a total of 511 patients were surveyed and 65 staff were surveyed.
- An analysis of routinely collected administrative and clinical data.
- *The breadth of the data collected for this evaluation is on par with, and in many cases exceeds that collected in overseas studies.*



Synergia Findings



PAs are safe: 30,000 patients seen by PAs with no issues of clinical safety

PAs were found by their colleagues to be adaptive & flexible and to:

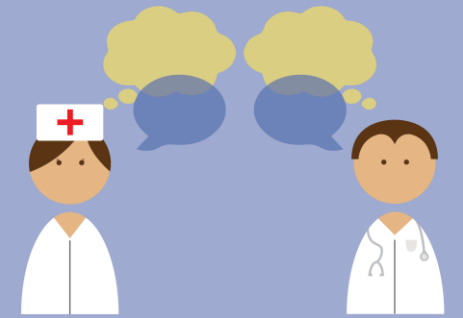
- Improve the throughput of patients
- Reduce the workload of existing staff

PAs integrated well:

“For the most part, the practice models have generally not changed, with the PAs operating in their clinical settings in a similar capacity to doctors.”

An exception - “Tokoroa created a temporary **walk-in clinic run by a PA** over the peak season of winter months. The practice saw an **additional 900 patients** over a 3-month period.” Synergia p.64





Synergia Findings Cont

Impact on:

Nurses:

- No negative impact on nursing
- Two roles were seen as complementing each other

Junior Doctors:

- PAs had ***not affected the employment of junior docs... nor had it affected support for junior doctor training***
- Many saw the PAs as being ideal for supporting the training of junior doctors

Synergia p.63



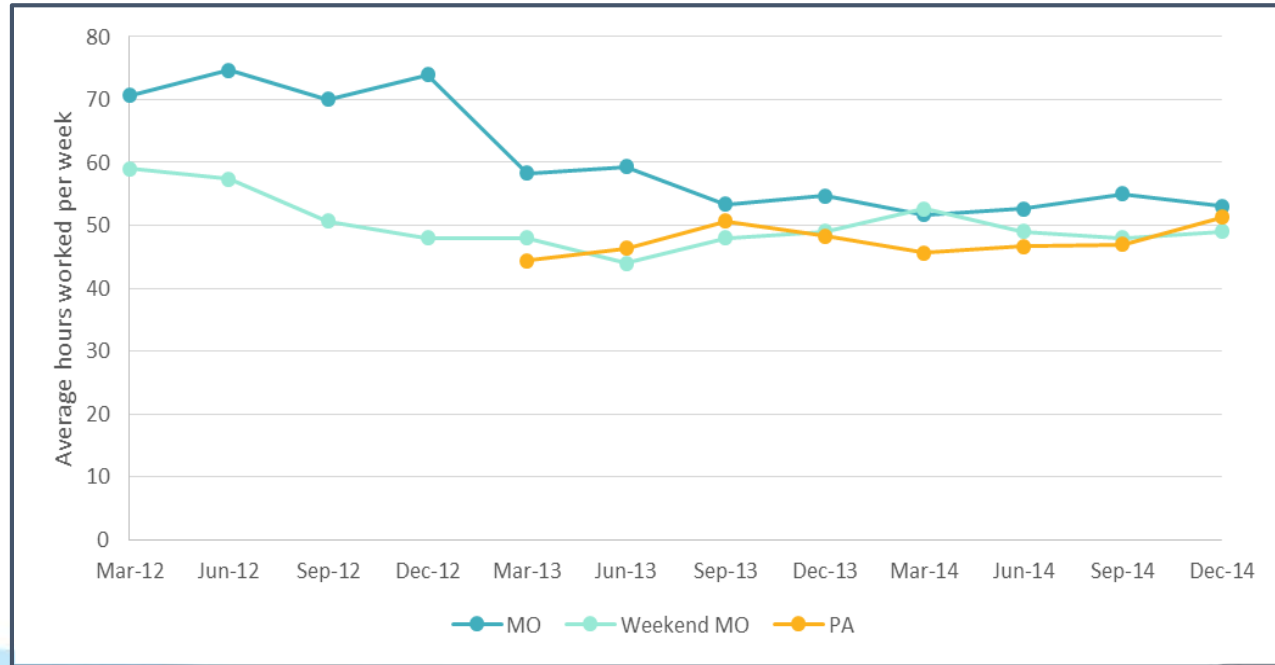
Prescribing:

“The lack of prescribing rights was the most commonly cited challenge to the integration of the PA role.... ***Allowing PAs to prescribe was also the most frequently cited recommendation for the future development of the role in New Zealand in the staff survey.***”

Synergia p.12

Gore Experience - Clinician Hours

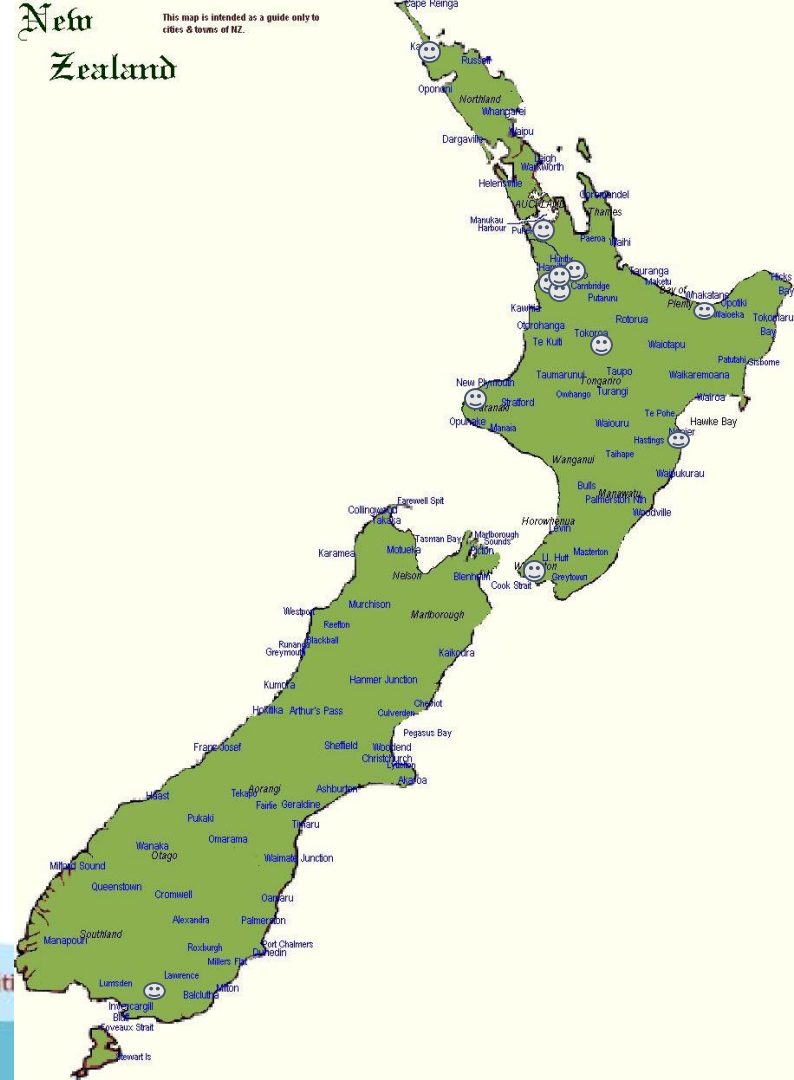
- The PA working at Gore ED had a substantial effect on the working hours of the other clinicians.
- With the PA, average hours worked per week for **MOs reduced from 72.3 hours per week to 54.8 hours per week.**
- Hours of the weekend MOs reduced from 53.8 hours per week to 48.5 hours per week.





Past- Auckland, Whakatane, Tokoroa

- South GP CME** General Practice Conference & Medical Exhibition



What's in it for me/my clinic?

Demonstrated benefits of PAs



- Better patient outcomes
- Reduced waiting times
- Greater patient satisfaction
- Greater efficiencies
- More time/less workload = less stress
- Better work/life balance = “Home for dinner”
- Better workforce flexibility
- Increased job satisfaction, doctor retention
- Potential advancement career pathway
- Greater workforce stability = a possible solution to assist in alleviating the shortage of doctors
- Reduction in labour costs
- Young workforce
- ...And much more!

Looking forward...

- **Continue to recruit & retain PAs with prior ED/generalist experiences in rural, remote & other settings**
- **Promote the PA role throughout NZ as a strategy for increasing health care access, retaining doctors, Increasing efficiency and sustainability.**
- **Regulation under the Health Practitioners Competence Assurance Act 2003 and prescribing authority so PAs may practice at their full scope**
- **Training Programs - Kiwis from rural areas could be recruited and trained to become PAs with the expectation that they return home to practice**



I'm interested in a PA, what's the next step?

The NZ PA Society is happy to help point you in the right direction.

- We can post jobs to a wide audience of PAs
- Put you in touch with a PA recruiter who does all the work for you.
- “Hiring a PA” Documents
- Voluntary registry
- Confirm a PA is certified by searching their NCCPA number:
<https://www.nccpa.net/verify-pa>
- New PAs to NZ should shadow PAs that are already established

You can contact us at nzpasociety@gmail.com

Thank you

GP CME Christchurch
Ropata Medical Centre
Te Awamutu Medical Centre
Gore Hospital
Te Hikau Hauora, Kaitiaia
Hasting Health Centre Urgent Care
NZ Medical Association
NZ Medical Council
And all those who support PAs.

“It is my contention that the PA occupation is a **Significant Innovation** in the medical division of labor.”

Eugene S. Schneller, Ph.D.
- 1978



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<https://www.facebook.com/nzpas/>

