

**MEDICAL  
ASSOCIATE  
PROFESSIONS**

# Physicians' Assistants

(Anaesthesia)

Northern Care Alliance  
NHS Group

For more information visit  
[www.nhsemployers.org](http://www.nhsemployers.org)

## The organisation

The Northern Care Alliance NHS Group brings together Salford Royal Hospital NHS Foundation Trust and The Pennine Acute Hospitals NHS Trust. It comprises five local hospitals, 2,000 beds, specialist and acute services, a range of community services, and over 17,000 staff.

Salford Royal trains and educates clinicians of the future. It employs seven physicians' assistants (anaesthesia) (PA(A)).

## Background

In 2003, The Royal College of Anaesthetists developed the New Ways of Working in Anaesthesia (NWWA) programme to address the impending shortage of trained specialist anaesthetists.

The aim was to create a non-medical role to increase the flexibility of anaesthetic services and build capacity in anaesthesia teams. It was not about cost cutting, or to simply address staff shortages, it was developed to ensure that patients received appropriate care from the most appropriate member of the multidisciplinary team.

At the same time, employers were being encouraged to consider new ways of working to improve patient experience and it was felt that the role of PA(A) would support the effective expansion of clinical services.

## What the trust did

The trust submitted a business case to the strategic health authority to fund the costs of training PA(A)s on the postgraduate diploma in anaesthetic practice with the University of Birmingham. The approval of funding meant the trust became one of the first pilot sites to receive two PA(A)s with places on the course.

The PA(A)s attended the University of Birmingham for a total of three days a year. This involved an initial induction day, followed by exams and the mock objective structured clinical examination (OSCE). The final OSCE examination took place, and continues to take place, at the Royal College of Anaesthetists in London.

The trust provided support to the PA(A)s in terms of funding, annual leave, and time to attend conferences, lectures and regional teaching hosted by the Association of Anaesthetists and the Royal College of Anaesthetists, to aid their continuous professional development.

Following successful integration of the new roles into the team, the trust undertook audits to measure the value that PA(A)s were adding to the efficiencies of the department.

## Challenges

The PA(A)s were allocated to the anaesthetic department's medical staffing rota. Initially anaesthetists in training believed that this would reduce their ability to access both clinical and educational opportunities.

However, it quickly became clear that the PA(A) role helped to support and facilitate training: they inputted into trauma meetings, developed operating lists and plans, reviewed patients and obtained consent, and prepared the operating theatre and any drugs required.

Anaesthetists in training soon realised that the PA(A)s were not employed for the same purpose as them and came to accept and value the role.

## Outcomes

The PA(A)s are allocated to the anaesthetic rota, working Monday to Friday, 7.30am to 5.30pm, and are managed by the consultant anaesthetist and the clinical director.

The trust recognised that the same efficiencies were needed at weekends and organised for the PA(A)s to join the weekend rota. This enabled anaesthetists in training at core level to spend more of their time focusing on the emergency cases which are valuable for their education and training.

The trust also provides its PA(A)s with support and training to develop specialist interest areas in emergency medicine, regional anaesthesia, trauma and orthopaedics, including the administration of local anaesthetic nerve block, regional anaesthesia and spinal anaesthesia.

All of this has helped to make operating theatres work more efficiently.

## Next steps

### Appraisal

The trust has recognised that the appraisal model for non-medical staff does not meet the needs of PA(A)s. Therefore, it is looking to move them onto the PReP appraisal system which is used for doctors.

## Expansion of physicians' assistants (anaesthesia)

Salford Royal is the primary site for major trauma cases across Greater Manchester and the trust is planning to build a new acute centre on site. This additional capacity and demand may create further scope to train another cohort of PA(A)s.

## National representation

One of the trust's PA(A)s was nominated to undertake the role of chairman for the Association of Physicians' Assistants (Anaesthesia). This national body helps to raise awareness of the role and represents the views of PA(A)s on a UK-wide basis in discussions with key stakeholders, particularly on topics such as indemnity, development, prescribing, regulation and support.

### Top tips

- Early recruitment - ensure funding is approved in time to advertise the job between April-July to attract and recruit graduate PA(A)s.
- Make the PA(A)s part of the department- integrate them into the team and ensure they are managed by the consultant anaesthetist or clinical director rather than being overseen by the nursing staff.
- Use PA(A)s to support the needs of your trust, this may be dependent upon the complexity of the cases.

