

New Zealand Physician Associate Society:

Hiring Guidance

Version 2

As of February 2021, the Physician Associate (PA) profession is not yet regulated in New Zealand. This document serves as a guide from the New Zealand Physician Associate Society (NZPAS) to those wanting to employ qualified PAs to ensure greater patient safety and company satisfaction with this new health workforce in NZ.

Many of our recommendations stem from the two part PA Pilot conducted between 2010-2015 by Health Workforce New Zealand and from the first group of PAs who worked in the New Zealand Healthcare System. There are increasing numbers of PAs being employed here and these guidelines are updated annually based on new information and feedback from these highly satisfied employees.

Before You Hire a PA, What Should You Know About Them in General?

Physician Associates (PAs) work under the supervision of a doctor to take histories, conduct physical exams, order and interpret labs and imaging, refer to specialists, diagnose, and treat patients. They also perform procedures such as - but not limited to - punch biopsies, suturing, excisional biopsies, joint injections, setting simple fractures, immunizations, venipuncture, and foreign body extractions. Their scope of practice is determined by their supervising doctor and generally mirrors that of their supervising doctor.

While PAs function under the supervision of a doctor, the doctor is not in the same room as the PA, however they must be available to the PA for questions either in the clinic or by phone whenever the PA is working. PAs in the USA prescribe medications. The PA is supervised by the doctor prospectively by deciding on practice responsibilities; concurrently by being available to answer questions as needed; and retrospectively by chart review.

PAs are not currently trained in NZ. In the USA, where PAs have been a profession for over 50 years, they are trained in Medical Schools by doctors, physician assistants, and nurse practitioners. They generally come to PA programs with several years of medical experience in a variety of health professions such as: nursing, emergency/paramedicine, pharmacy, radiologic technology, pathology/laboratory medicine, emergency first response, adventure medicine, etc. They complete a vigorous 2 - 2.5 year full-time masters program with the first year focused on didactic work with additional hands-on minor procedure training and cadaver labs. The remainder is spent in a wide range of clinical placements alongside third year medical students.

The education is broad with competencies in general practice, behavioral health, pharmacology, surgery, orthopedics, emergency or urgent care. Some PAs do placements in underserved or rural communities as well. In addition, each PA can choose specialties to study as their interests dictate. Once a PA has graduated from

an accredited PA school they are eligible to take a national certification exam and must apply for a state license to practice medicine. After they have passed this exam, they are a certified PA and can be hired by a doctor, clinic or a healthcare system. They must complete 100 hours of continuing education each year and re-sit the national certification exam every 10 years. Their medical credentialing is designated by a PA-C after their family name (example: John Smith PA-C) and a PA-C is not allowed in any way to infer or state that they are a doctor.

What are PAs Currently Allowed to do in NZ?

PAs are currently allowed to take histories, perform physical exams, order labs and images, interpret labs and images, perform clinical procedures, provide orders to nursing and other support staff, write referrals, and any other duties agreed upon with their supervising doctor. A scope of practice is used and tailored and agreed upon between the supervising doctor and each PA based on skill sets, experience and clinic/hospital requirements. While you do not currently need this document for regulation purposes in NZ, it is a vital part of creating the Doctor-PA Practice.

PAs can be covered under liability insurance with Medicus.

What are PAs Currently NOT Allowed to do in NZ?

PAs are not allowed to prescribe. PAs do not practice under standing orders. PAs conduct their visits, print their scripts and then find a supervising doctor to sign the script before returning to the patient to finish the visit. In New Zealand prescribing rights would likely follow regulation. PAs practicing here in New Zealand have been prescribing in the US for years prior to working here and like doctors follow safe prescribing guidelines.

PAs cannot sign WINZ forms or ACC forms. They are allowed to see patients for these appointments, fill out the required forms and send them with the permission, review and knowledge of their supervising physician.

How do we Find a PA?

Until further regulation is put into place, the NZPA Society recommends hiring PAs from the US or Manitoba Canada. Rationale: First, as a profession we are applying for regulation followed by prescribing rights in NZ. US PAs are all licensed to prescribe and have been doing so throughout their professional careers. Transitioning to NZ would be a "horizontal" move in terms of prescribing. A PA currently practicing in Australia, for example, does not have prescribing rights. Practicing in NZ would be a "vertical" move for this PA and we cannot know the amount of supervision needed with this type of transition at this time. Secondly, until regulation, Health Workforce NZ advised that we continue to work in the model of the second demonstration which only brought on U.S. trained PAs.

NZPAS recommends hiring a PA with 3-5 years working experience as a PA. Three of these years should ideally be in the same scope that they will practice in here. This is important because the PA will be much more experienced than a new graduate with respect to the PA role, medical knowledge and skills as well as the Supervising Physician-PA relationship. For many NZ doctors, this will be their first time supervising a PA and they may need some assistance from the PA on how this relationship can work best.

GP Business Solutions is a New Zealand group that recruits PAs. gpbs.co.nz and nzpas.org.nz can help. There are many websites to place job postings. We recommend reaching out to the New Zealand Physician Associate Society at nzpasociety@gmail.com as your initial step.

What Qualifications Should Be Required of a PA?

The NZPAS recommends any PA coming to work in NZ meet requirements and be listed on our volunteer registry. Hiring only PAs holding a current national certification with the Nation Commission on Certification of Physician Assistants (NCCPA). This certification is required for PA practice in all 50 US states. All US PAs will have an "NCCPA Number". The PA will typically provide this number on their CV. The employer can then go to the following website to verify that the PA is in good standing with NCCPA and therefore certified to practice:

https://www.nccpa.net/verify-pa

Provided the PA holds current certification and has no infractions on their license, NZPAS would consider them qualified to practice in NZ pending any immigration requirements. A PA in NZ should maintain their current NCCPA certification while employed as a PA in NZ.

What is a Supervising Doctor/Physician?

This has yet to be specifically regulated. The NZPAS recommends that there should be one Lead Supervising Doctor who is vocationally registered in NZ. There can also be secondary supervising physicians to sign prescriptions and answer questions throughout the clinical day.

The relationship between a PA and the supervising physician is one of mutual trust and respect. The PA is a representative of the physician, treating the patient in the style and manner developed and directed by the supervising physician. The physician and PA practice as members of a medical team.

In 1995, the American Medical Association (AMA) developed Guidelines for Physician–Physician Assistant Practice. These are based on the unique relationship of physician assistants who recognize themselves as agents of physicians with respect to delegated medical acts and legal responsibilities. In all settings, physician assistants recognize physician supervision in the delivery of patient care. The suggested guidelines are as follows:

- 1. The physician is responsible for managing the health care of patients in all practice settings.
- Health care services delivered by physicians and physician assistants must be within the scope of each practitioner's authorized practice as defined by state law.
- The physician is ultimately responsible for coordinating and managing the care
 of patients and, with the appropriate input of the physician assistant, ensuring
 the quality of health care provided to patients.
- 4. The physician is responsible for the supervision of the physician assistant in all settings.
- 5. The role of the physician assistant(s) in the delivery of care should be defined through mutually agreed upon guidelines that are developed by the physician and the physician assistant and based on the physician's delegatory style.
- 6. The physician must be available for consultation with the physician assistant at all times either in person or through telecommunication systems or other means.
- 7. The extent of the involvement by the physician assistant in the assessment and implementation of treatment will depend on the complexity and acuity of the patient's condition and the training and experience and preparation of the physician assistant as judged by the physician.
- 8. Patients should be made clearly aware at all times whether they are being cared for by a physician or a physician assistant.
- 9. The physician and physician assistant together should review all delegated patient services on a regular basis, as well as the mutually agreed upon guidelines for practice.
- 10. The physician is responsible for clarifying and familiarizing the physician assistant with his/her supervising methods and style of delegating patient care.

How Does a Clinic Prepare for a PA?

The Health Workforce NZ PA Pilot Study and the current practices employing PAs have shown that the clinic sites who were prepared for a PA had better success than those that were not prepared. Here are some helpful tips for preparing your clinic:

- Inform all staff from doctors to nurses to administration that a PA will be joining the practice. Most PAs initially do a powerpoint presentation at a staff meeting when they start at a clinic.
- Educate staff on what a PA is and provide them with resources to answer patient questions.
- Inform your partnering lab, imaging, and pharmacological services that you are bringing on a PA.
- Prepare posters for your clinic stating that a PA is working in the practice and what their role is in the clinic. The PAs' name should be written as "Jon Smith Physician Associate-C" on name badges, door placards and displayed where physician and nurse practitioners names are displayed.
- Provide training for the PA on your clinic, your EHR, how to refer to your hospital, WINZ, ACC, DHB, Pharmac, NZF, etc.
- Make sure the Supervising Doctor is prepared to meet with the PA prior to the PA starting practice so that supervision is clearly established. It is important to remember that the PA is not a "training doctor" or a "junior doctor" but an extension of the physician.
- Be flexible. There are bound to be some difficulties for the PA acclimatising to the NZ healthcare system and for the clinic staff to adjust to this new role. Supporting open communication will ease these initial hurdles.
- Inform your patients that you are adding a new role and provider to your medical team.

Questions?

Please do not hesitate to contact the NZ PA Society if you have any questions regarding hiring a PA or about the profession itself. The NZPAS can also connect you with clinics currently working with PAs to discuss first hand how they benefit the practice.

You can email us at nzpasociety@gmail.com
or find us online at https://www.facebook.com/nzpas or nzpas.org.nz