

Investigating the contribution of physician assistants to primary care in England: a mixed-methods study

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Plain English summary

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Plain English summary

General practice is changing and employing different types of staff in response to changing needs and delivering more care outside hospitals. One such type of staff is physician assistants (PAs), who are trained in a medical model over 2 years at postgraduate level and work under a supervising doctor. This study looked at the contribution PAs could make and whether or not they were acceptable and provided safe care. We answered this through multiple research activities including investigating the patient experience. We found that PAs were mainly deployed to provide same-day appointments for patients. They were in the main acceptable to professional groups, patients and health-care and workforce planners, although patients wanted to ensure that they had choice in who to consult. The PAs worked in ways to complement the general practitioners (GPs), seeing patients who had less complex and medically acute problems. There was no difference between PAs and GPs in the rate of patients returning with the same problem within 2 weeks. A clinical review of PA records and consultations judged them competent and safe. Consultations with PAs were on average longer than those with GPs and cost the health service less, although we could not account for all costs. We concluded that PAs are an asset in primary care and could offer a flexible addition to the staffing. This has implications both for health professional workforce and education planning and for the inclusion of PAs in regulatory processes.

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