



Royal College  
of Physicians

Faculty of  
Physician Associates

# Focus on physician associates: census 2022





## Introduction

The Faculty of Physician Associates (FPA) annual census is the largest survey of the physician associate (PA) profession and PA students in the UK. It was established in 2015 and provides vital insight into the continued growth of the profession and supports workforce planning and research.

As the profession continues to grow and evolve to work in an increasing range of specialties and we continue to prepare for regulation, we rely on this evidence to ensure that we can plan appropriately.

**We encourage national NHS organisations, such as NHS Digital, to ensure that their key datasets have appropriate coding for PAs so that, in time, we can develop a full picture of the profession.**



## Key points

- > PA regulation has progressed. The Department of Health and Social Care (DHSC) ran a consultation on the draft legislation to bring anaesthesia associates (AAs) and PAs into regulation.
- > PAs continue to be satisfied with their roles. 89% of respondents say that they enjoy their job and 83% would recommend it to a friend.
- > 10% of PAs take part in on-call rotas. Those who do so work an average of 10.3 hours per week on call.
- > We are seeing a continued increase in workforce pressures. 53% of PAs say that they work under excessive pressure (an increase from 49% in 2021).
- > The number of PAs with protected time in their contract for work other than direct clinical care has increased for the second year to 39%, and 58% of this group say they are always able to use it.

## Highlights of FPA work in 2022/23

- > Elected a new president and vice president and reviewed and aligned our goals and messaging.
- > Secured funding to relaunch the Developing Excellence in Leadership programme that aims to educate and train PAs to develop their roles and become leaders in the future.
- > Launched a new draft curriculum to provide higher education institutions across all four devolved UK nations with a standardised framework to ensure high-quality education for PA students – this is another vital step towards achieving regulation for the profession.
- > Hosted a series of wellness evenings with members to explore the ongoing pressures experienced by PAs, and shared how we can offer guidance and support.
- > Welcomed qualified FPA members to apply to join a task and finish group focusing on the development and finalisation of the FPA Career Development Pathway.
- > Supported PA students by offering them the opportunity to pay their PA National Examination fees in instalments – allowing them to focus on their studies and relieve financial burdens.
- > Began developing the FPA ePortfolio, an exclusive resource to support qualified members, available from autumn 2023.
- > Further strengthened the FPA Board by welcoming two newly elected qualified PAs and appointed a new secretary to continue increasing the level of support offered to members.
- > Held the most successful FPA conference to date in December 2022 with over 1,200 delegates registering to increase their clinical knowledge, network virtually with colleagues and hear from a field of over 40 experts, who together delivered a learning experience as unique as the profession.
- > Continued to work with a variety of stakeholders including the Royal College of Psychiatrists, Royal College of Obstetricians and Gynaecologists and Royal College of Ophthalmologists to further support the profession.



PAs to be regulated by the GMC by the second half of 2024

## Regulation

The importance of achieving regulation for PAs remains a high priority, and we have continued to work closely with the DHSC and the General Medical Council (GMC). Representatives from both organisations spoke at the FPA annual virtual conference in December 2022, delivering sessions that outlined the next steps in the journey.

In February 2023, we welcomed the long-awaited release of the DHSC's draft legislation and consultation that will bring PAs into regulation. Together with the RCP, we submitted a joint response to the consultation.

To support and guide our members, we opened a dedicated 'FPA regulation' email inbox to help answer queries, and held a series of Q&A sessions to further explain the process to our members. We encouraged members to submit their responses and developed written guidance to support them with this process. We'd like to thank all members who engaged with our Q&A sessions and submitted a response to the consultation.

Following the closure of the consultation in May 2023, we now await a response from the government. The intention is for the legislation to be laid before parliament in the second half of 2023, with the GMC then regulating PAs by the end of 2024.

During this time, we continue to raise awareness of the need for PA regulation through our [#RegulatePAsNow](#) campaign.

## Next steps

We're now entering a transitional period for the PA profession, with regulation expected to be in place by the end of 2024. During this time, we will:

- > guide and support members through the journey to regulation by producing written and video guidance
- > educate PAs about how they should introduce themselves to patients
- > create a Core Clinical Practice Framework to help PAs evidence their generalist clinical skills
- > work closely with the RCP Patient and Carer Network to produce guidance that will inform patients about the role of a PA
- > produce the FPA Career Development Pathway to help PAs continue to progress in their careers
- > launch the FPA ePortfolio – an exclusive member benefit to further support PAs in practice.
- > support members through the new revalidation process, following the removal of the PA Recertification Assessment
- > continue to invite members to contribute to the national voice of the profession by facilitating Q&A sessions and surveys
- > showcase the benefits of being a PA
- > continue creating guidance documents that will help PAs and their employers understand their full scope of practice.



## Methodology

Each PA and student PA received a unique link to a personalised survey from the RCP's Medical Workforce Unit. Links were sent electronically between 25 October 2022 and 31 January 2023 to PAs on the Managed Voluntary Register (MVR) as well as PA student members.

There were 551 survey respondents, 454 of whom were PAs and 97 were PA students.

In addition to the data collected via the survey, this report draws on the membership data held by the FPA and the RCP. It helps to provide a more complete insight into the PA workforce at the point of sending the census survey.

I'm supporting  
**#RegulatePAsNow**  
 to allow PAs to  
 contribute even more  
 to the workforce



## The workforce

**3,240\***

physician associates were on the MVR on 1 October 2022

\*454 PAs completed the survey, a return rate of 14%.

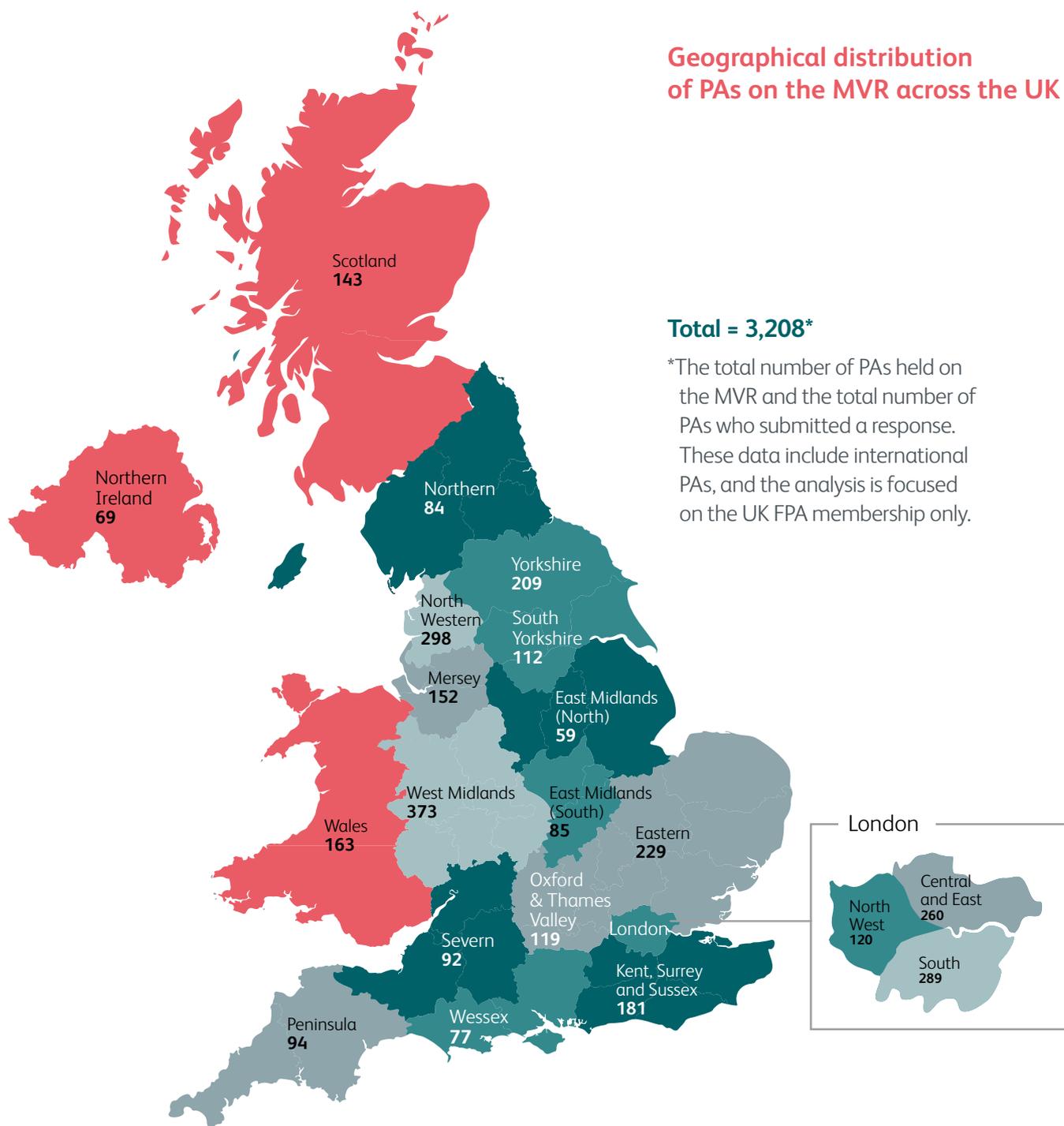


### Number of PAs by country

Country	MVR October 2022	Census respondents 2022	Census respondents 2021
England	2,833	326	690
Northern Ireland	69	11	19
Scotland	143	30	34
Wales	163	21	41

\*The total number of qualified PAs and the total number who submitted a response. These data include international PAs, and the analysis is focused on the UK FPA membership only.

## Geographical distribution of PAs on the MVR across the UK



In line with previous years, the profession continues to grow. We are pleased to see the expansion of PAs across all four devolved nations compared with 2021, and there is great potential for the profession to continue expanding.

## Demographics

- > 79% of respondents were women and 19% were men
- > Less than 1% of respondents identified as transgender or non-binary and less than 1% preferred not to answer
- > 68% of respondents were English, Welsh, Scottish, Northern Irish or British. The next largest groups were African (8%), Indian (6%) and Pakistani (4%)
- > 13% of respondents considered themselves to be disabled or to have a long-term health condition
- > 86% of respondents were heterosexual. Around 6% were gay, 5% were bisexual and 3% preferred not to say.

## Education

- > 46% of respondents had completed a postgraduate diploma. A further 55% held a master's degree
- > Under 1% took a different route, holding either a certificate or a bachelor's degree. These are usually earlier qualifications from the USA, where 2% of respondents trained.

## Previous healthcare experience

- > 57% of respondents had healthcare experience across 41 different roles before becoming a PA
- > The most common experience was as a healthcare assistant (39%), followed by volunteer in a healthcare setting (14%), nurse (11%), care home or nursing home assistant (7%), clinical laboratory technician or healthcare administrator (5% each)
- > 8% had had prescribing rights in a previous role.

# The role

The vast majority of respondents were practising clinically as a PA.

## Practice status

Status (choose all that apply – respondents were able to choose more than one option)	%
Practising as a physician associate	85%
PA educator – University setting	10%
PA educator – Clinical setting	7%
Practising as a physician associate in a training post	4%
Currently seeking work as a physician associate	4%
Researcher	1%
Undertaking an internship/ preceptorship	1%
Not working right now (ie for family care or personal reasons)	1%
Working, but not as a physician associate	1%
Have become a doctor or have entered medical school	1%
Other	7%

## Clinical settings

62% of respondents were employed by an NHS trust as their main employer. 35% were employed by a general practice or primary care network. Less than 1% were working for a private healthcare provider.

Respondents were working in a range of clinical settings, including 39% in a GP surgery, 22% in an inpatient ward, 13% in accident and emergency and 8% in a medical assessment unit. Other settings included specialist surgery, psychiatry or mental health service, care home, rehabilitation facility, operating theatre, intensive care unit and urgent care centre. 25% also had a secondary area of work.

## Specialties

PAs reported working in more than 37 specialties. Most respondents worked in one specialty, but 18% also worked in a secondary specialty, a decrease from 32% last year.

General practice remained the main area of practice for PAs clinically and there has been an increase of 3%\* of PAs working in emergency medicine. The percentage of PAs working in psychiatry has also doubled\*.

Specialty	%
General practice	37%
Emergency medicine	12%
Acute medicine	9%
Care of the elderly / geriatric medicine	5%
Psychiatry	4%
General surgery	3%
Respiratory medicine	3%
Trauma and orthopaedics	2%
Cardiology	2%
General internal medicine	2%
Other	2%
Stroke medicine	2%
Gastroenterology	1%
Community medicine	1%
ENT/ otolaryngology	1%
Haematology	1%
Paediatrics – acute	1%
Colorectal surgery	1%

## Specialties (cont)

Specialty	%
Vascular surgery	1%
Orthopaedic surgery	1%
Dermatology	1%
Rehabilitation medicine	1%
Rotation pattern between specialties	1%
Neurosurgery	1%
Paediatric psychiatry	1%
Urology	1%
Medical oncology	1%
Nephrology	1%

From previous census reports, we are aware of PAs working in several other specialties, including general paediatrics, plastic surgery and obstetrics and gynaecology.

\*When compared with the FPA census 2021 report.

## Clinical tasks

PAs reported that they carried out a wide range of clinical tasks, which of course vary depending on the specialty in which they work. The majority of PAs said they carried out general medical activities.

Medical activities performed by PAs	%
Take medical history	98%
Perform physical examination	97%
Perform patient education	90%
Manage acute conditions (eg musculoskeletal injury, lacerations, COPD flare)	85%
Manage chronic conditions (eg diabetes, high blood pressure, COPD)	80%
Manage emergent conditions (eg stroke, pulmonary embolus, chest pain, trauma)	69%
Perform psychiatric assessment	53%
Pelvic examination (palpation of cervix, uterus and adnexae)	30%

**Clinical (cont)**

Miscellaneous activities performed by PAs	%
Take bloods / perform venepuncture	79%
Interpret ECG	76%
Arterial blood gas	50%
Place IVs / perform cannulation	47%
Urinary catheterisation	40%
NG tube placement	30%
Ultrasonography	13%
Other	12%
Chest tube / drain insertion	9%
Lumbar puncture	9%
Paracentesis / peritoneal drain	8%
General newborn examinations	7%
Pulmonary function testing	4%
Cervical smear	4%
Skin biopsy	3%
Mole removal	3%
Radiography	3%
Bone marrow biopsy	3%
Coil / IUD placement	2%
Coil / IUD removal	2%
Implant placement	1%
Lipoma removal	1%
Skin cancer removal	1%
Implant removal	1%
OGD	<1%
Cystoscopy	<1%

### Clinical tasks (cont)

Activities performed by PAs working in surgical care, critical care or accident and emergency	%
Arterial blood gas	70%
Urinary catheterisation	54%
NG tube placement	35%
Suturing	22%
Surgical first assisting	14%
Lumbar puncture	11%
Paracentesis / peritoneal drain	11%
Arterial line insertion	5%
Chest tube / drain insertion	5%
Incision and drainage of abscess	5%
Thoracentesis / pleural drain intubation	5%
FAST ultrasound testing for trauma	3%
PICC line placement	3%
Port placement (Groshong, Hickman, Mediports etc)	3%

Activities performed by PAs working in orthopaedics	%
Nerve blocks	15%
Casting / splinting	8%
Dislocation reduction	8%
Fracture reduction	8%
Hematoma blocks	8%

## Contracted and worked hours

There is little variation between the hours PAs are contracted for and the hours they actually work.

	Contracted average (hours)	Worked average (hours)
Direct clinical care	32	34
Supporting professional activities	4	4
Academic programmed activities	3	3
Other professional activities	3	3

## On-call and home visits

10% of respondents said they took part in an on-call rota. They were on call for 10.3 hours per week on average. 23% of respondents undertook home visits.

## Protected time

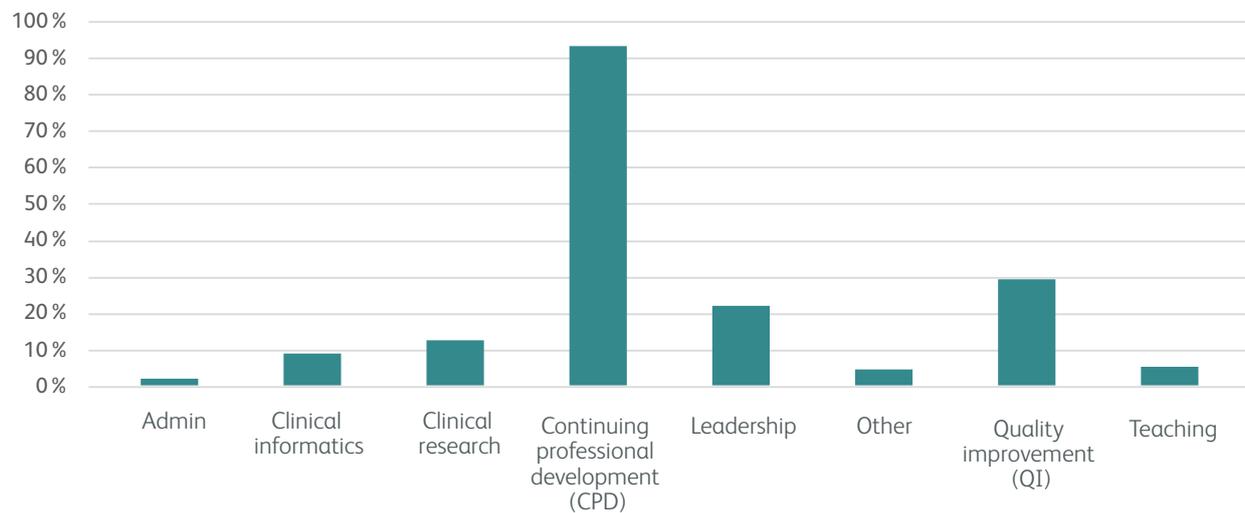
The number of respondents who have protected time for work other than direct clinical care increased from 2021 (39% vs 36%). That leaves around two-thirds of respondents with no contracted time for activities such as developing themselves and their practice, helping improve services or carrying out research.

The 39% who do have protected time usually had half a day a week. 59% said they were always able to use their protected time; 32% were able to sometimes and 9% were never or rarely able to use it.



Two-thirds of respondents don't have protected time for developing themselves and their practice

### What do you use your protected time for?



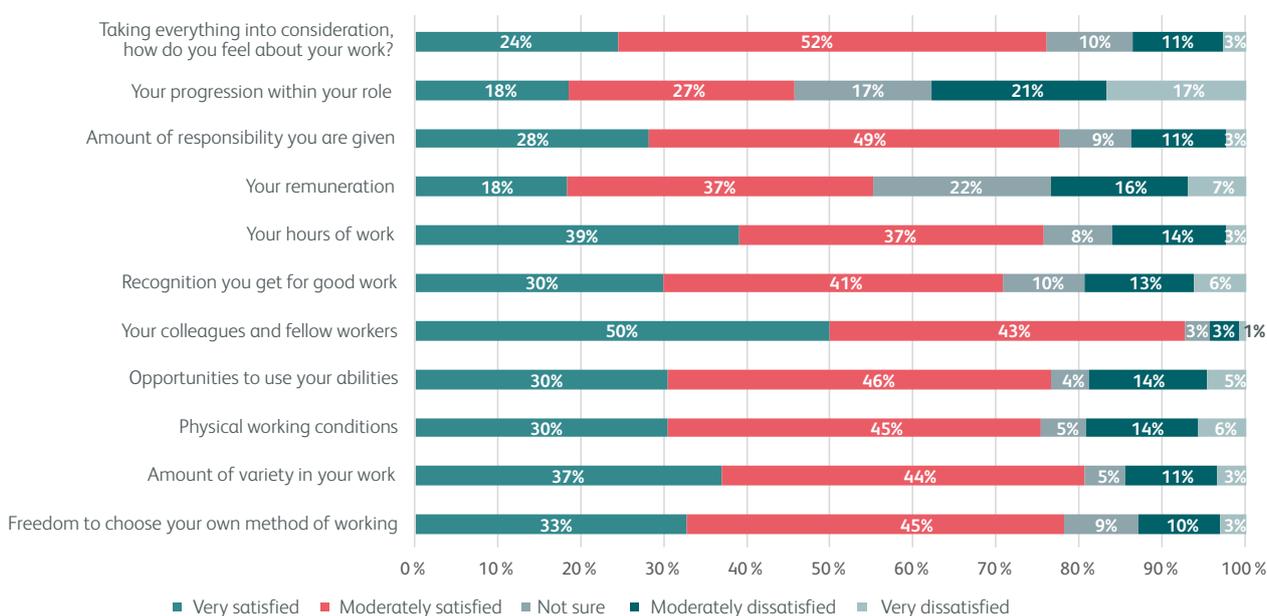
### Indemnity

The FPA is often asked about indemnity insurance – in addition to NHS resolution cover – for PAs. 71% of respondents were covered under their employer’s indemnity scheme, with 23% saying they were unsure. 21% of respondents had additional ‘top-up’ cover, with 64% of those who had additional cover paying the cost.

# Job satisfaction

The majority of respondents were either satisfied or very satisfied with all aspects of their roles. They were particularly satisfied with their colleagues and fellow workers.

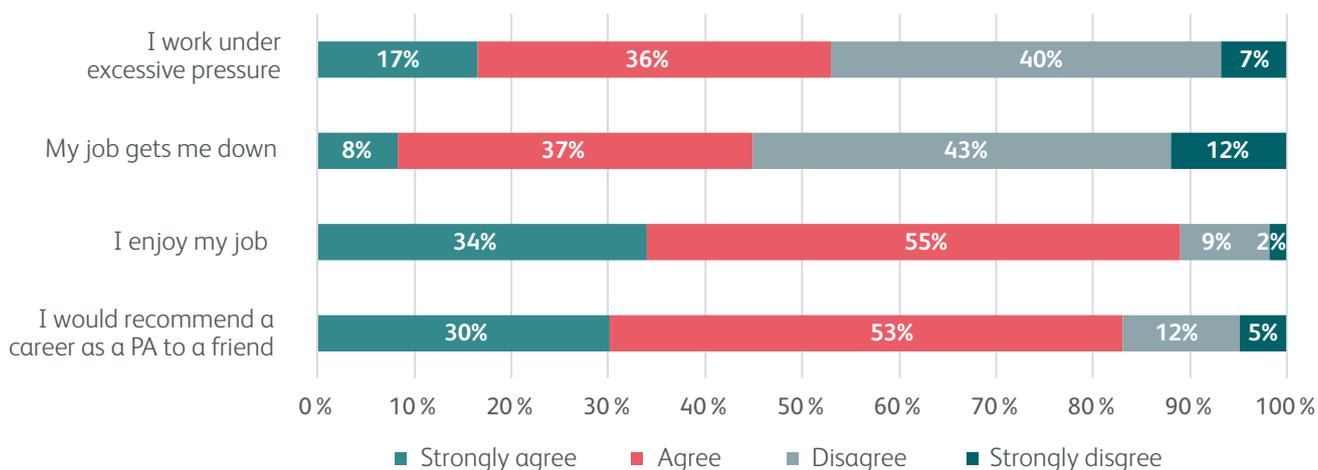
More than half of respondents (51%) felt in control of their workload at least most of the time, with a further 10% of respondents almost never feeling in control.



51% of respondents feel in control of their workload at least most of the time

## Morale

We are pleased that most respondents would recommend the PA role, even though 53% either agreed or strongly agreed that they work under excessive pressure. 83% either agreed or strongly agreed that they would recommend the PA career to a friend and 89% enjoyed their job.



## Working as part of the team

The majority of PAs felt valued in their place of work. Respondents felt most valued by their clinical line manager and least by the organisation management.

	Almost always	Most of the time	About half of the time	Sometimes	Almost never
Do you feel valued by medical colleagues?	27%	43%	17%	10%	3%
By non-medical colleagues?	31%	43%	12%	12%	2%
By patients?	28%	48%	12%	12%	0%
By your clinical line manager?	34%	36%	9%	11%	10%
By your organisation management?	17%	29%	18%	15%	21%

# Physician associate students

## Progress since last year

- > Developed a pre-payment scheme to support students studying for the PA National Examination (PANE). The scheme allows student members of the FPA to pay towards the PANE in monthly instalments, to spread the cost to support the financial burden
- > Supported students by creating guidance on how to apply for a PA role and top tips for attending interviews
- > Produced an improved FAQs section on the FPA website for students sitting the PANE – including dedicated FAQs addressing all areas of the examination process.

Country	Student members October 2022	Census respondents 2022	Census respondents 2021
England	1,072	55	212
Northern Ireland	17	2	9
Scotland	17	2	7
Wales	74	6	21

**\*The total number of PA students and the total number who submitted a response. These data include international PAs, and the analysis is focused on the UK FPA membership only.**

## Demographics

- > 79% of student respondents were women and 19% were men. 2% of respondents identified as transgender or non-binary and less than 1% preferred not to answer
- > 75% of respondents identified as English, Welsh, Scottish, Northern Irish or British. The next largest groups were Indian (7%), African (5%), and Pakistani (5%)
- > 21% of respondents considered themselves to be disabled or to have a long-term health condition
- > 84% of respondents said they were heterosexual, 5% were gay and 7% were bisexual.

## Education and experience

- > 89% of student respondents were enrolled on a master's degree. 10% were studying for a postgraduate diploma, with 1% as an overseas qualification
- > 60% of student respondents had healthcare experience prior to embarking on PA training
- > Of those who had healthcare experience, 32% worked as a healthcare assistant, 24% as a volunteer in a healthcare setting, 13% as a nurse, 9% as a clinical laboratory technician and 11% as a home health assistant or home carer.

## The Faculty of Physician Associates

The Faculty of Physician Associates (FPA) at the Royal College of Physicians (RCP) provides professional support to physician associates across all four devolved nations of the UK. Physician associates are healthcare professionals who are trained to a generalist medical model. They are skilled to work alongside doctors and in assessing, diagnosing and treating patients, delivering high-quality patient care.

### Contact details

For queries relating to the 2022 FPA census, please contact the FPA membership team:

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