



Royal College
of Physicians

Faculty of
Physician Associates

Physician Associate Curriculum

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About this curriculum

Introduction

This curriculum is for higher education institutions (HEIs) to guide the development of their physician associate (PA) courses. It is owned by the Faculty of Physician Associates (FPA) and is aligned to the General Medical Council's (GMC's) *Generic and shared outcomes for physician associates and anaesthesia associates*,¹ and aims to provide a standardised framework to ensure high-quality PA education across the UK.

This curriculum establishes the newly qualified PA as:

- > an accountable, capable and compassionate clinician
- > a valuable member of the healthcare workforce
- > a professional, responsible for maintaining their own practice through appraisal, reflective practice and engagement with continuing professional development (CPD) activities.

HEIs design their individual course programmes, which utilise a range of educational methods. Most programmes employ a mix of didactic lectures and skills training, small group work and self-directed learning. All programmes include experiential learning in the form of clinical placements. HEIs may determine their own entry requirements and course length.

All programmes are subject to the GMC's quality assurance processes and HEIs must demonstrate that their courses meet the standards set out in *Promoting excellence*.²

All graduates of PA courses must pass the GMC's PA registration assessment (PARA) before joining the register and being allowed to practise as a PA.

Development, maintenance, standards and quality assurance

This curriculum was developed between 2020 and 2022 by the FPA, supported by advice and expertise from the Royal College of Physicians (RCP), the Physician Associate Schools Council (PASC) and the GMC.

It was developed, and will be maintained, to the standards for the design of medical curricula and assessment systems set out in the GMC's *Excellence by design (EBD)*.³

Theme 5 of EBD sets out the maintenance requirements and states that the curriculum must be 'regularly reviewed and there are processes in place to make sure it is monitored and improved to keep it up to date' (CS5.1). The FPA must demonstrate to the GMC that it continues to meet this standard.

Every year, the FPA will review whether any improvements or updates need to be made to the curriculum. They will consider quality assurance (QA) data from the GMC and others; feedback from the PASC, course providers and students; and targeted feedback from less-than-full-time students,

¹ www.gmc-uk.org/education/standards-guidance-and-curricula/standards-and-outcomes/pa-and-aa-prequalification-educationframework/pa-and-aa-generic-and-shared-learning-outcomes [Accessed 29 September 2022].

² www.gmc-uk.org/education/standards-guidance-and-curricula/standards-and-outcomes/promoting-excellence [Accessed 27 July 2022].

³ www.gmc-uk.org/education/standards-guidance-and-curricula/standards-and-outcomes/excellence-by-design [Accessed 27 July 2022].

students who share protected characteristics, lay education experts, patients and equality, diversity and inclusion (ED&I) experts.

The FPA will consider the available information and determine whether any curriculum changes are needed in the short, medium or long term, and publish regular reports.

Equality, diversity and inclusion (ED&I)

The FPA is committed to improving ED&I across education and healthcare, and this curriculum reinforces that commitment by ensuring that the PAs of the future are well-equipped to help tackle the inequalities they witness in their work. As such, ED&I is woven through this document and should be fully integrated into all PA students' learning.

The guidance offered and the language used have been carefully chosen and are intended to have a positive impact on the learning experience of all PAs, and to help improve ED&I in PA education.

This includes requirements for course providers, such as ensuring that assessors have appropriate ED&I training (page 24). It includes guidance on 'feedback dialogue', which helps to ensure that feedback is a two-way interaction between educator and learner (page 25). It also includes many of the outcomes described in the capabilities in practice (CiPs), covering not just behaviours towards others, but also understanding health inequalities and the social determinants of health, and variation between different population groups (pages 6–21).

As described above, the FPA will ensure that the views of diverse groups will be included in the ongoing review of this curriculum.

Structure of this curriculum

This curriculum is made up of two main sections.

Programme of learning (page 5) sets out what a PA student should learn during their course. The core of this section is the CiPs, which are the high-level learning outcomes that all PA students are expected to achieve by the time they qualify.

Educational approach (page 24) contains requirements and guidance for course providers on how they should approach ED&I, supervision and educator roles, feedback and reflection, record keeping, clinical placements and assessment.

Newly qualified PAs

Newly qualified PAs must enter practice as effective members of the healthcare workforce.

By graduating from an approved PA course and passing the PARA, they have demonstrated the knowledge, skills and behaviours set out in this curriculum.

From their first day of employment as a professional, they must put their knowledge, skills and behaviours into practice to provide safe and effective patient care, as part of a multidisciplinary team. This includes considering evidence-based practice, using clinical reasoning and making decisions.

They must show a commitment to CPD and reflective practice, and demonstrate that they welcome, support and value ED&I.

Subject to the scope of their role, competence and regulation, a newly qualified PA can be expected to:

1. formulate and document a differential diagnosis, having taken a history and completed a physical examination
2. recognise life-threatening and emergency situations and escalate care appropriately
3. request, perform and interpret diagnostic studies and therapeutic procedures, and recommend a management plan, including therapeutics
4. deliver and maintain patient-centred clinical management in partnership with the patient and multidisciplinary team, dealing with uncertainty when it arises
5. work in partnership with patients from diverse backgrounds to agree comprehensive and individualised management plans
6. undertake patient education, counselling and health promotion.

Programme of learning

This section establishes a framework for what PA students should learn during their course. Course providers should use this framework as a guide when developing their own programme or syllabus.

Standards and outcomes for PA students

Once registered with the GMC, PAs will be expected to be familiar with *Good medical practice: interim standards for physician associates and anaesthesia associates*⁴ and to use the guidance when making decisions with patients about their care. They need to use their judgement about how to apply the guidance. This will depend on the specific circumstances of each decision; they should take a proportionate approach.

⁴ <https://www.gmc-uk.org/ethical-guidance/good-medical-practice-2024/get-to-know-good-medical-practice-2024> [Accessed 14 September 2023].

Before they qualify, PA students must also always demonstrate a high standard of professional behaviour, which justifies the trust placed in them as a future member of the profession. Guidance for students is set out in *Achieving good medical practice: interim guidance for PA and AA students*.⁵

Both *Good medical practice* and *Achieving good medical practice* describe the professional values and behaviours that the GMC expects from all PAs and PA students. Those values and behaviours fall broadly into four areas:

- > knowledge, skills and performance
- > safety and quality
- > communication, partnership and teamwork
- > maintaining trust.

They cover a wide range of situations, including working cooperatively with colleagues, practising in line with the best available evidence, and working within the limits of your competence.

The GMC's professional standards should be referenced in course providers' teaching, aligned to the CiPs outlined below, to ensure that PA students have a thorough understanding of the expectations of their profession, their regulator and the public.

Capabilities in practice (generic and clinical)

The CiPs set out below are the high-level learning outcomes that all PA students are expected to achieve by the time they qualify.

They are grouped into two categories, covering the universal requirements of PAs:

- > **generic** CiPs largely focus on the wider professional skills, knowledge and behaviours required to deliver effective and safe patient care
- > **clinical** CiPs largely focus on the clinical aspects of practice.

Each CiP is linked to a set of 'descriptors', which are intended to provide the minimum level of knowledge, skill and attitudes that should be demonstrated by newly qualified PAs.

The descriptors are intended to help supervisors and students recognise the minimum standards that should be demonstrated. They are not exhaustive, nor should they be viewed as a tick-list. There may be many more examples outside the descriptors list that would provide equally valid evidence of performance.

To complete the course, PA students must demonstrate that they meet the minimum performance across each of the CiPs **as defined by their course provider**.

The CiPs are mapped to the GMC's *PA and AA generic and shared learning outcomes (GSO)*⁶ to maximise learning opportunities and create PAs who practise safely. Core knowledge and generic clinical skills will be standard across all PA syllabi, although how they are learned will differ between programmes.

⁵ www.gmc-uk.org/Education/Standards-guidance-and-curricula/Guidance/Student-professionalism-and-FTP/Achieving-goodmedical-practice-interim-guidance-for-PA-and-AA-students [Accessed 29 September 2022].

⁶ www.gmc-uk.org/education/standards-guidance-and-curricula/standards-and-outcomes/pa-and-aa-prequalification-educationframework/pa-and-aa-generic-and-shared-learning-outcomes [Accessed 29 September 2022].

Generic CiPs

1. Demonstrates professional behaviour and probity	
Descriptors	<ul style="list-style-type: none"> > Exemplifies adherence to professional codes of conduct and is responsible and accountable for their actions and omissions while working within the scope of their clinical practice > Consistently behaves with integrity and sensitivity > Behaves as an ambassador for the role of PA, acting professionally and behaving considerately, respectfully and inclusively towards other professionals and patients > Recognises and works within the limits of their professional competence and scope of practice and within the scope of practice of their supervising clinician > Maintains effective relationships with colleagues from other health and social care professions > Informs patients, carers and others of the nature of the role of a PA > Demonstrates duty of candour appropriately > Demonstrates awareness of personal responsibilities and wellbeing, and is able to self-monitor, self-care and seek appropriate advice and support > Manages time and workload appropriately
Linked to GSO	<p>Theme 1 – Professional behaviour and trust</p> <ul style="list-style-type: none"> > Professional duties and responsibilities: 1 > Being honest and trustworthy: 2 > Personal responsibilities and wellbeing: 8 <p>Theme 2 – Professional capabilities</p> <ul style="list-style-type: none"> > Holistic and integrated care: 12 > Working in multiprofessional teams: 16 > Respect for colleagues: 17 > Management and leadership: 18 > Manage time and workload: 19 <p>Theme 3 – Clinical care</p> <ul style="list-style-type: none"> > Complex care and uncertainty: 28 <p>Theme 4 – Safety and quality</p> <ul style="list-style-type: none"> > Healthcare resource management: 34

2. Is able to deal with ethical and legal issues responsibly

<p>Descriptors</p>	<ul style="list-style-type: none"> > Negotiates and works within an individual scope of practice within legal, ethical, professional and organisational policies, governance and procedures on managing risk and upholding safety > Draws on ethical and legal frameworks and critically evaluates situations to make judicious decisions > Demonstrates critical decision-making in awareness of and adherence to national legislation and legal responsibilities, including safeguarding of vulnerable groups and the principles of equality legislation in the context of patient care > Understands the role of the GMC in the regulation of PAs > Explains and demonstrates the importance of seeking consent from patients or their responsible carers > Maintains confidentiality and respects patients' dignity and privacy > Recognises and acts on people's beliefs, preferences and choices to create a psychologically and culturally safe environment for patients and colleagues > Welcomes and supports diversity and values people as individuals, demonstrating an awareness of how their attitudes and behaviours may influence or affect others > Identifies and addresses ethical and legal issues, which may impact on patient care, carers and society, including when contributing to a complaint response > Demonstrates ability to take appropriate action regarding safeguarding concerns and promotes the welfare of vulnerable patients > Accepts and responds positively to feedback > Escalates concerns appropriately through both informal and formal channels as appropriate about: <ul style="list-style-type: none"> ○ patient safety and quality of care ○ bullying, harassment and undermining ○ bias and discrimination leading to inequality of care for patients or inequitable opportunities for colleagues.
<p>Linked to GSO</p>	<p>Theme 1 – Professional behaviour and trust</p> <ul style="list-style-type: none"> > Professional duties and responsibilities: 1 > Being honest and trustworthy: 2, 3 > Person-centred care and shared decision-making: 4, 5, 6 > Consent and mental capacity: 7 > Personal responsibilities and wellbeing: 8 > Legal responsibilities: 9, 10, 11 > Theme 2 – Professional capabilities > Holistic and integrated care: 12 > Communication: 14 > Safeguarding: 15 > Working in multiprofessional teams: 16 > Respect for colleagues: 17 > Management and leadership: 18

2. Is able to deal with ethical and legal issues responsibly

Theme 3 – Clinical care

- > Using information effectively and safely: 31

3. Is able to communicate effectively and demonstrates interpersonal skills

Descriptors

- > Communicates clearly, sensitively and effectively with patients, their relatives, carers or others in a variety of settings, demonstrating empathy, compassion, courtesy and respect, and advocating for patient needs
- > Creates psychologically safe and inclusive healthcare environments
- > Listens to patients, takes account of their views, and responds honestly and openly to their questions
- > Tries to find out what matters to patients so they can share relevant information about the benefits and harms of proposed options and reasonable alternatives, including the option to take no action
- > Is considerate to those close to the patient and is sensitive and responsive in giving them information and support
- > Identifies and utilises opportunities for patient and carer education
- > Communicates appropriately with patients, carers, colleagues and others, even when communication is difficult
- > Demonstrates effective consultation skills, including effective verbal and non-verbal interpersonal skills
- > Shares decision-making by informing the patient, making the care of the patient their first concern, and respecting the patient's beliefs, concerns, and expectations
- > Identifies and manages barriers to communication (eg cognitive impairment, speech and hearing problems, language barriers)
- > Adjusts their communication approach as required, for example for people who communicate differently due to a disability, who speak a different first language or who are from a different cultural background
- > Uses appropriate language in their communication to role model the principles of ED&I
- > Articulates their clinical reasoning and explains their decision-making process to diverse audiences of all ages
- > Initiates and maintains accurate, timely and relevant medical records
- > Communicates effectively with clinical, professional and other colleagues
- > Carries out clear and effective handover to colleagues
- > Develops and maintains effective teamworking and interpersonal relationships, which includes recognising and showing respect for the roles and skills of the people they work with and listening to their contributions
- > Welcomes, supports and values diversity within and across teams
- > Role-models self-awareness, emotional intelligence and resilience, and engages in courageous conversations when advocating for self and others

3. Is able to communicate effectively and demonstrates interpersonal skills

	<ul style="list-style-type: none"> > Adapts own professional language and actively promotes the use of a range of communication styles to influence, advocate and promote PA practice to different audiences
Linked to GSO	<p>Theme 1 – Professional behaviour and trust</p> <ul style="list-style-type: none"> > Professional duties and responsibilities: 1 > Being honest and trustworthy: 2, 3 > Person-centred care and shared decision-making: 4, 5, 6 > Consent and mental capacity: 7 <p>Theme 2 – Professional capabilities</p> <ul style="list-style-type: none"> > Communication: 14 > Working in multiprofessional teams: 16 > Respect for colleagues: 17 > Management and leadership: 18 > Manage time and workload: 19 <p>Theme 3 – Clinical care</p> <ul style="list-style-type: none"> > Using information effectively and safely: 31 <p>Theme 4 – Safety and quality</p> <ul style="list-style-type: none"> > Patient safety and quality improvement: 32

4. Is able to function within healthcare organisational and management systems

Descriptors	<ul style="list-style-type: none"> > Recognises their role in contributing to the management and leadership of the health service > Demonstrates awareness of local procedures and protocols, including those related to the death of a patient > Contributes to an inclusive environment for patients and colleagues by demonstrating effective and compassionate leadership appropriate to their role > Exemplifies an open and transparent culture by demonstrating respectful and effective team working and being an active bystander – challenging behaviours, respecting and valuing diversity > Demonstrates that they welcome, support and value ED&I within and across teams > Works collaboratively across care settings, demonstrating knowledge and understanding of the range of services available > Manages risk appropriately, especially where there may be complex and unpredictable events, and supports teams to do likewise to ensure safety of individuals, families and carers > Demonstrates judicious use of resources > Recognises that there are differences in healthcare systems across the four nations of the UK
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4. Is able to function within healthcare organisational and management systems

Linked to GSO

Theme 2 – Professional capabilities

- > Working in multiprofessional teams: 16
- > Management and leadership: 18

Theme 4 – Safety and quality

- > Patient safety and quality improvement: 32
- > Healthcare resource management: 34

5. Is focused on patient safety and understands the role of quality improvement in patient care

Descriptors

- > Prioritises patient safety in clinical practice and places patient needs and safety at the centre of the care process
- > Recognises potential clinical risk situations and takes appropriate action
- > Recognises risks to themselves, the team, patients and others, and takes appropriate action to eliminate/minimise danger
- > Raises and escalates concerns where there is an issue with patient safety or quality of care
- > Demonstrates commitment to learning from patient safety investigations and complaints
- > Shares good practice appropriately with others
- > Promotes and maintains health and safety in all settings, escalating concerns to and requesting support from colleagues where appropriate, including applying the principles of infection prevention and control
- > Contributes to quality improvement
- > Understands and applies the principles of human factors within own practice
- > Creates and promotes an environment of psychological safety for patients and colleagues
- > Recognises and works within limit of personal competence, escalating issues and concerns as appropriate
- > Critically appraises and applies evidence on an individual patient basis to deliver high-quality care
- > Recognises how errors can happen in practice and demonstrates ability to learn from their own and others' errors to promote a culture of safety
- > Recognises the potential consequences of over-diagnosis and overtreatment
- > Recognises key diagnostic errors and the issues relating to diagnosis in the face of incomplete data

Linked to GSO

Theme 1 – Professional behaviour and trust

- > Professional duties and responsibilities: 1
- > Being honest and trustworthy: 2, 3
- > Person-centred care and shared decision-making: 4, 5, 6
- > Consent and mental capacity: 7
- > Legal responsibilities: 9, 10, 11

5. Is focused on patient safety and understands the role of quality improvement in patient care

	<p>Theme 2 – Professional capabilities</p> <ul style="list-style-type: none"> > Holistic and integrated care: 12 > Communication: 14 > Safeguarding: 15 > Working in multiprofessional teams: 16 > Respect for colleagues: 17 > Management and leadership: 18 > Manage time and workload: 19 > Lifelong learning: 20, 21, 22 <p>Theme 3 – Clinical care</p> <ul style="list-style-type: none"> > Diagnosis and effective consultations: 23, 24, 25 > Medical management: 26 <p>Theme 4 – Safety and quality</p> <ul style="list-style-type: none"> > Patient safety and quality improvement: 32
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6. Understands the application of research and is able to manage information and data safely

Descriptors	<ul style="list-style-type: none"> > Understands the importance of information governance, confidentiality, and data protection legislation, and complies with local information governance and storage procedures when recording, transferring and coding patient information > Applies the principles of health informatics to medical practice > Manages clinical and research data appropriately, demonstrating adherence to local and national policy > Understands the role of evidence in clinical practice and supports patients in their decision-making with regards to involvement in research > Critically evaluates own clinical practice, selecting and applying valid, reliable methods to improve quality > Demonstrates appropriate knowledge of research methods, including qualitative and quantitative approaches in scientific enquiry > Critically appraises relevant research, evaluation and quality improvement, and uses the results to inform own clinical practice
Linked to GSO	<p>Theme 1 – Professional behaviour and trust</p> <ul style="list-style-type: none"> > Professional duties and responsibilities: 1 > Being honest and trustworthy: 2, 3 > Person-centred care and shared decision-making: 4, 5, 6 > Consent and mental capacity: 7 > Legal responsibilities: 9, 10, 11

6. Understands the application of research and is able to manage information and data safely

	<p>Theme 2 – Professional capabilities</p> <ul style="list-style-type: none"> > Communication: 14 > Working in multiprofessional teams: 16 > Respect for colleagues: 17 > Management and leadership: 18 > Manage time and workload: 19 > Lifelong learning: 21, 22 <p>Theme 3 – Clinical care</p> <ul style="list-style-type: none"> > Diagnosis and effective consultations: 24 > Using information effectively and safely: 31 <p>Theme 4 – Safety and quality</p> <ul style="list-style-type: none"> > Patient safety and quality improvement: 32 > Clinical research and scholarship: 33
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7. Is able to safeguard vulnerable patients

Descriptors	<ul style="list-style-type: none"> > Identifies signs and symptoms of abuse or neglect and is able to safeguard children, young people, adults and older people, using appropriate systems for sharing information, recording and raising concerns with supervising clinicians > Takes a history that includes consideration of the patient’s views, needs and values and any associated vulnerability, and reflects this in care plans > Understands the needs of, and support required for: <ul style="list-style-type: none"> ○ people with a learning disability ○ people with mental health conditions > Considers the needs and welfare of adults, children and young people who may be vulnerable, and acts promptly on any concerns about a patient, or someone close to a patient, who may be at risk of, or suffering, abuse or neglect > Understands the professional responsibilities in relation to procedures performed for non-medical reasons, such as female genital mutilation and cosmetic interventions > Understands the relevant health legislation that may result in the deprivation of liberty to protect the safety of individuals and society > Recognises where addiction (to drugs, alcohol, smoking or other substances), poor nutrition, self-neglect, environmental exposure, or financial or social deprivation are contributing to ill health and takes action by seeking advice from colleagues and making appropriate referrals
Linked to GSO	<p>Theme 2 – Professional capabilities</p> <ul style="list-style-type: none"> > Safeguarding: 15

8. Develops as a learner and educator

Descriptors	<ul style="list-style-type: none"> > Engages in appropriate and timely CPD > Utilises reflection as a development tool > Participates in the effective teaching, mentoring and training of other healthcare professionals, adapting to individuals' diverse backgrounds and experiences, including for colleagues who are new to UK practice and those who don't have easy access to sources of support > Recognises the factors that cause inequality of opportunity and the importance of equality of access to learning opportunities, and ways to address these > Actively engages in feedback dialogue on their developing competence, and understands how their own behaviour and values can impact on others > Contributes to a culture of organisational learning and promotes collaboration of the wider team – clinical, academic and patients – to identify and facilitate team learning > Educates patients, carers and others on the nature of the role of a PA > Acts as a role model for others and the profession
Linked to GSO	<p>Theme 1 – Professional behaviour and trust</p> <ul style="list-style-type: none"> > Professional duties and responsibilities: 1 > Being honest and trustworthy: 2, 3 > Personal responsibilities and wellbeing: 8 > Legal responsibilities: 9, 10, 11 <p>Theme 2 – Professional capabilities</p> <ul style="list-style-type: none"> > Communication: 14 > Working in multiprofessional teams: 16 > Respect for colleagues: 17 > Management and leadership: 18 > Lifelong learning: 20, 21, 22 <p>Theme 3 – Clinical care</p> <ul style="list-style-type: none"> > Using information effectively and safely: 31 <p>Theme 4 – Safety and quality</p> <ul style="list-style-type: none"> > Patient safety and quality improvement: 32 > Clinical research and scholarship: 33 > Teaching and learning: 35

Clinical CiPs

1. Demonstrates knowledge, clinical reasoning and judgement in formulating differential diagnoses and clinical decision-making	
Descriptors	<ul style="list-style-type: none"> > Demonstrates awareness of the socio-economic factors that may contribute to health, illness and disease in different population groups and is able to apply this understanding when assessing and treating patients > Seeks timely engagement with other colleagues / healthcare professionals as appropriate > Demonstrates awareness of own limitations within clinical practice and proactively seeks support when recognising limits of practice
Linked to GSO	<p>Theme 1 – Professional behaviour and trust</p> <ul style="list-style-type: none"> > Professional duties and responsibilities: 1 > Being honest and trustworthy: 2, 3 > Person-centred care and shared decision-making: 4, 5, 6 > Consent and mental capacity: 7 > Legal responsibilities: 9, 10, 11 <p>Theme 2 – Professional capabilities</p> <ul style="list-style-type: none"> > Holistic and integrated care: 12 > Health promotion and illness prevention: 13 > Communication: 14 > Working in multiprofessional teams: 16 > Respect for colleagues: 17 > Management and leadership: 18 > Manage time and workload: 19 <p>Theme 3 – Clinical care</p> <ul style="list-style-type: none"> > Diagnosis and effective consultations: 23, 24, 25 > Medical management: 26 > Emergency and acute care: 27 > Complex care and uncertainty: 28 > Managing prescribed medicines safely: 29, 30 > Using information effectively and safely: 31 <p>Theme 4 – Safety and quality</p> <ul style="list-style-type: none"> > Patient safety and quality improvement: 32

2. Understands safe prescribing of medications	
<i>All PA courses should support students to learn the capabilities described below, as newly qualified PAs will be required to use many of these prescribing skills, with appropriate supervision, in their day-to-day work, regardless of whether they are legally allowed to prescribe.</i>	
Descriptors	<ul style="list-style-type: none"> > Establishes an accurate medication history, covering both prescribed and non-prescribed medications, herbal medicines, supplements and drugs of abuse

2. Understands safe prescribing of medications

All PA courses should support students to learn the capabilities described below, as newly qualified PAs will be required to use many of these prescribing skills, with appropriate supervision, in their day-to-day work, regardless of whether they are legally allowed to prescribe.

- > Establishes and clarifies medication allergies and the types of medication interactions that patients experience
- > Describes medications and medication actions: therapeutics and pharmacokinetics, medication side effects and interactions, including for multiple treatments, long-term conditions and non-prescribed drugs
- > Describes the role of antimicrobial stewardship in safe prescribing
- > Recognises the challenges of safe prescribing for patients in high-risk groups such as those with long-term conditions, multiple morbidities and medications, in pregnancy, at extremes of age and at the end of life
- > Recognises patient choice to use complementary therapies and how this might affect the safety and efficacy of other types of treatment that patients receive
- > Recognises the challenges of delivering care when prescribing and providing treatment and advice remotely, for example via online services and is able to demonstrate in a simulated environment how to:
 - carry out an assessment of benefit and risk for the patient of starting a new medication, taking into account the medication history and potential medication interactions in partnership with the patient and, if appropriate, their relatives, carers or other advocates
 - provide patients, carers or others with appropriate information about their medications in a way that enables patients to make decisions about the medications they take
 - recognise the risks of over-prescribing and excessive use of medications and apply these principles to prescribing practice
 - agree a medication plan with the patient that they are willing and able to follow
 - calculate safe and appropriate medication doses and record the outcome accurately, seeking support and advice from the supervising doctor or healthcare professional, pharmacist or other colleagues when necessary
 - prepare safe and legal prescriptions for a prescriber, tailored to the specific needs of individual patients, using either paper or electronic systems and using decision support tools where necessary
 - utilise reliable information about medications and use different technologies to support prescribing
 - communicate appropriate information to patients, carers and others about what their medication is for, when and for how long to take it, what benefits to expect, any common or serious adverse effects that may occur and what follow-up will be required
 - monitor the efficacy and effects of medication and, with appropriate advice from colleagues, adjust medication, including stopping medication with due support, care and attention if it proves ineffective, is no longer needed or the patient wishes to stop taking it

2. Understands safe prescribing of medications

All PA courses should support students to learn the capabilities described below, as newly qualified PAs will be required to use many of these prescribing skills, with appropriate supervision, in their day-to-day work, regardless of whether they are legally allowed to prescribe.

	<ul style="list-style-type: none"> ○ detect and report adverse medication reactions and therapeutic interactions and react appropriately by stopping or changing medication
Linked to GSO	<p>Theme 3 – Clinical care</p> <ul style="list-style-type: none"> > Managing prescribed medicines safely: 29, 30

3. Participates in acute intervention for patients, recognising the acutely deteriorating patient, and the need for the delivery of resuscitation

Descriptors	<ul style="list-style-type: none"> > Assesses and determines the severity of a clinical presentation and the need for immediate emergency care > Diagnoses and manages acute medical and psychiatric emergencies, escalating appropriately to colleagues for assistance and advice > Prioritises tasks to initiate interventions in a timely manner to form a collaborative management plan working in partnership with patients, and liaises with other team members as appropriate > Communicates clinical reasoning and decision-making to the patient, carers or others > Works collaboratively across services to provide optimal care > Performs prompt assessment of the patient who presents an acute risk to themselves or to others in the context of mental disorder or lack of capacity > Works as part of a team, and with supervisors, to select, manage and interpret appropriate investigations in a timely manner > Demonstrates appropriate reassessment and ongoing management of acutely unwell patients > Uses evidence-based interventions in acute medical and psychiatric emergencies > Recalls, and acts in accordance with, professional, ethical and legal guidance in relation to cardiopulmonary resuscitation (CPR) > Participates sensitively and effectively in conversations regarding CPR, including decisions to not attempt CPR, and involves patients, carers and others as appropriate > Demonstrates competence in carrying out resuscitation
Linked to GSO	<p>Theme 1 – Professional behaviour and trust</p> <ul style="list-style-type: none"> > Professional duties and responsibilities: 1 > Being honest and trustworthy: 2, 3 > Person-centred care and shared decision-making: 4, 5, 6 > Consent and mental capacity: 7 > Legal responsibilities: 9, 10, 11 <p>Theme 2 – Professional capabilities</p> <ul style="list-style-type: none"> > Holistic and integrated care: 12

3. Participates in acute intervention for patients, recognising the acutely deteriorating patient, and the need for the delivery of resuscitation

- > Communication: 14
 - > Safeguarding: 15
 - > Working in multiprofessional teams: 16
 - > Respect for colleagues: 17
 - > Management and leadership: 18
 - > Manage time and workload: 19
 - > Lifelong learning: 20, 21, 22
- Theme 3 – Clinical care**
- > Diagnosis and effective consultations: 23, 24, 25
 - > Medical management: 26
 - > Emergency and acute care: 27
 - > Complex care and uncertainty: 28
 - > Managing prescribed medicines safely: 29, 30
 - > Using information effectively and safely: 31
- Theme 4 – Safety and quality**
- > Patient safety and quality improvement: 32

4. Assesses and manages patients in a range of healthcare settings, including management of long-term conditions

Descriptors	<ul style="list-style-type: none"> > Demonstrates the ability to manage medical problems in patients under the care of a range of specialties and in a range of healthcare settings, escalating appropriately to colleagues for assistance and advice > Demonstrates evaluative skills in the assessment and maintenance of ongoing treatment plans, escalating concerns as appropriate > Appropriately manages comorbidities as part of a multidisciplinary team in outpatient clinic, ambulatory or community settings > Constructs appropriate diagnostic and management plans as part of a multiprofessional team, taking into account patient preferences > Explains clinical reasoning behind diagnostic and clinical management decisions to patients, carers and others and with colleagues > Recognises when liaison with other services is required, and does so in a timely way > Recognises the role of the multidisciplinary and wider health and social care team as part of integrated care in the management of conditions and special cases > Demonstrates effective communication and proactively seeks support when recognising limits of practice > Demonstrates awareness of local services and community opportunities available to support patient care, including those that facilitate wellbeing > Effectively and efficiently hands over responsibility to other health and social care professionals
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4. Assesses and manages patients in a range of healthcare settings, including management of long-term conditions

	<ul style="list-style-type: none"> > Demonstrates awareness of the quality of patient experience > Identifies, as part of a team and with supervisors, patients with limited life expectancy and their palliative and end-of-life care needs
Linked to GSO	<p>Theme 1 – Professional behaviour and trust</p> <ul style="list-style-type: none"> > Professional duties and responsibilities: 1 > Being honest and trustworthy: 2, 3 > Person-centred care and shared decision-making: 4, 5, 6 > Consent and mental capacity: 7 > Legal responsibilities: 9, 10, 11 <p>Theme 2 – Professional capabilities</p> <ul style="list-style-type: none"> > Holistic and integrated care: 12 > Communication: 14 > Safeguarding: 15 > Working in multiprofessional teams: 16 > Respect for colleagues: 17 > Management and leadership: 18 > Manage time and workload: 19 > Lifelong learning: 20, 21, 22 <p>Theme 3 – Clinical care</p> <ul style="list-style-type: none"> > Diagnosis and effective consultations: 23, 24, 25 > Medical management: 26 > Emergency and acute care: 27 > Complex care and uncertainty: 28 > Managing prescribed medicines safely: 29, 30 > Using information effectively and safely: 31 <p>Theme 4 – Safety and quality</p> <ul style="list-style-type: none"> > Patient safety and quality improvement: 32

5. Is able to deal with complexity and uncertainty

Descriptors	<ul style="list-style-type: none"> > Recognises and acts on the complex medical needs, goals and priorities of patients, the factors that can affect a patient’s health and wellbeing and how these interact; these include psychological and sociological considerations that can also affect patients’ health > Demonstrates ability to adapt management proposals and strategies for dealing with health problems to take into consideration patients’ preferences, social needs, multiple morbidities, frailty and long-term physical and mental health conditions
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5. Is able to deal with complexity and uncertainty

	<ul style="list-style-type: none"> > Works collaboratively with patients, carers or others, in planning their care, negotiating and sharing information appropriately and supporting patient self-care > Works collaboratively with other health and care professionals and organisations when working with patients, particularly those with multiple morbidities, frailty and long-term physical and mental health conditions > Recognises how treatment and care can place an additional burden on patients, carers and others, and makes decisions to reduce this burden where appropriate, particularly where patients have multiple conditions or are approaching the end of life > Manages the uncertainty of diagnosis and treatment success or failure and communicates this openly and sensitively with patients, carers or others > Understands the clinical complexities, uncertainties and emotional challenges involved in caring for patients who are approaching the end of their lives and demonstrates the relevant communication techniques and strategies that can be used with the patient, carers or others
Linked to GSO	<p>Theme 2 – Professional capabilities</p> <ul style="list-style-type: none"> > Communication: 14 > Working in multiprofessional teams: 16 > Respect for colleagues: 17 > Management and leadership: 18 <p>Theme 3 – Clinical care</p> <ul style="list-style-type: none"> > Diagnosis and effective consultations: 23, 24, 25 > Medical management: 26 > Complex care and uncertainty: 28 > Managing prescribed medicines safely: 29, 30 <p>Theme 4 – Safety and quality</p> <ul style="list-style-type: none"> > Patient safety and quality improvement: 32

6. Understands the role of health promotion and illness prevention

Descriptors	<ul style="list-style-type: none"> > Understands and recognises the factors that contribute to illness, the course of the disease and the success of treatment and applies these to the care of patients – including: <ul style="list-style-type: none"> ○ issues relating to health inequalities and the social determinants of health, the links between occupation and health, and the effects of poverty and affluence ○ understanding and addressing the causes of health inequalities, including the factors within the health service itself ○ recognising that some groups have experienced and continue to face discrimination when accessing health and care services, and how this affects their trust in the medical professions
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6. Understands the role of health promotion and illness prevention

	<ul style="list-style-type: none"> ○ awareness of the existence of biases within the healthcare system that could affect health inequalities ○ having the clinical skills necessary to recognise conditions as they present in different population groups > Evaluates the social determinants of health and disease and variations in healthcare delivery and medical practice, and the impact these may have on local health and wellbeing, and is aware of health services being accessible to a diverse range of patients in hard-to-reach communities > Demonstrates a comprehensive understanding of primary and secondary health promotion, barriers to health promotion and concordance issues > Empowers patients to achieve the best health possible, including promoting lifestyle changes such as smoking cessation, avoiding substance misuse and maintaining a healthy weight through physical activity and diet > Discusses and advises patients on the role and impact of nutrition on health > Uses basic epidemiological techniques and measurements to describe the health of a population > Evaluates the environmental, social, behavioural and cultural factors that influence health and disease in different populations > Assesses, by taking a history, the environmental, social, psychological, spiritual, economic and cultural factors influencing a patient's presentation, and identifies options to address these, including advocacy for those who are disempowered > Understands how epidemiological data are used to manage healthcare for the individual and the community, with awareness of the clinical and cost-effectiveness of interventions > Educates patients, carers and others on the principles of primary, secondary and tertiary prevention of disease, including immunisation and screening > Understands the principles of sustainable healthcare and global health > Understands the role of environmental and occupational hazards in ill-health and the impact of climate change on health, and discusses ways to mitigate their effects > Applies the basic principles of communicable disease control in hospital and community settings, including disease surveillance
<p>Linked to GSO</p>	<p>Theme 2 – Professional capabilities</p> <ul style="list-style-type: none"> > Health promotion and illness prevention: 13 <p>Theme 3 – Clinical care</p> <ul style="list-style-type: none"> > Using information effectively and safely: 31

PA registration assessment

PAs must pass the physician associate registration assessment (PARA) to be eligible to join the GMC register. They must also meet the GMC's other eligibility requirements,⁷ including being awarded a qualification. Some PA students may be eligible to sit the PARA before they have completed their course. This depends on the structure of their course and the exam provider's eligibility requirements.⁸

The PARA is a test to determine whether the individual has the knowledge and skills to practise safely in the UK, comprising an applied knowledge test and an objective structured clinical examination. It tests to a minimum standard and is not a substitute for a course provider's own programme of assessment, which should incorporate formative and summative assessments, enhance learning and determine the learner's attainment of curriculum outcomes. Guidance on course assessment is below in the educational approach section.

However, courses should prepare PA students for the PARA. Course providers should ensure that there is broad coverage in their programmes of the professional values and behaviours, clinical capabilities and professional knowledge and skills set out in the PARA content map⁹ and that candidates are familiar with the assessment methods used in the current PARA.

The content map also includes some areas that are not assessed in the PARA, but should be assessed by course providers. Courses should reference the content map when developing their own assessment programme.

Practical procedures

Competence to perform a range of skills safely and effectively at the point of registration is essential for newly qualified PAs.

The core diagnostic, therapeutic and procedural skills set out below may be assessed in the PARA, and therefore courses should prepare PA students to be competent to perform these skills independently in adult patients.

For each of the procedures listed, a PA student must:

1. introduce themselves
2. check the patient's identity
3. confirm that the procedure is required
4. explain the procedure to the patient and gain informed consent
5. follow universal precautions to reduce the risk of infections, including hand hygiene, use of PPE and safe disposal of sharps
6. label samples appropriately
7. accurately document the procedure
8. ensure confidentiality
9. interpret any results and act appropriately on them
10. arrange appropriate aftercare/monitoring.

⁷ www.gmc-uk.org/pa-and-aa-regulation-hub/registration-for-pas-and-aas [Accessed 27 July 2022].

⁸ www.fparcp.co.uk/examinations/overview [Accessed 22 September 2022].

⁹ www.gmc-uk.org/education/standards-guidance-and-curricula/standards-and-outcomes/pa-and-aa-prequalification-educationframework/pa-registration-assessment-content-map [Accessed 29 September 2022].

Category	Procedure
Core clinical practice	Take baseline physiological observations (measure temperature, respiratory rate, pulse, blood pressure, oxygen saturations and urine output) and record appropriately
	Perform surgical scrubbing-up
	Participate in cardiopulmonary resuscitation to the level expected in Immediate Life Support (ILS) training
Core clinical practical procedures	Carry out venepuncture
	Carry out intravenous cannulation
	Carry out arterial blood gas and acid–base sampling from the radial artery in adults and be able to interpret results (in simulation only)
	Take blood for culture of infectious organisms via peripheral venepuncture
	Measure capillary blood glucose
	Explain to a patient how to perform a peak expiratory flow, assess that it is performed adequately and interpret results
	Carry out a urine multi-dipstick test and be able to interpret results
	Carry out a 12-lead electrocardiogram and be able to interpret results
	Take and/or instruct patients how to take a swab
	Carry out urinary catheterisation on men and women
Core therapeutic procedures	Carry out nasogastric tube placement (in simulation only)
	Recommend and administer oxygen appropriately
	Instruct patients in the use of devices for inhaled medication
	Undertake basic drug dose calculations
	Set up an infusion
	Prepare and administer medications, including parenteral medications (subcutaneous, intramuscular and intravenous)
	Use local anaesthetics in different forms (topical, subcutaneous infiltration, urethral)
	Carry out wound care and closure, including suturing and dressing

Educational approach

Introduction

This section includes requirements and guidance for the approach that HEIs should take to PA education.

HEIs are responsible for their own course design, and may employ a range of educational methods, but there are some minimum requirements. In general, PA courses must:

- > follow this curriculum
- > include a mixture of theoretical learning and experiential clinical placements
- > meet the GMC's standards for the management and delivery of medical education set out in *Promoting excellence*.

Course providers are responsible for the quality of education and training for PA students, as well as their welfare. Therefore, HEIs must:

- > engage with the GMC's quality assurance processes
- > be responsible for the quality management of the clinical placements they commission, checking that the placements provide high-quality learning experiences for PA students and meet the standards set out in *Promoting excellence*.

Equality, diversity and inclusion (ED&I) for course providers

PA course providers, including their partners associated with PA training, such as clinical placement providers, must ensure compliance with the requirements of equality and diversity legislation as set out in the Equality Act 2010.¹⁰

HEIs must also ensure that each training programme complies with the ED&I standards in postgraduate medical training as set by the GMC. They should provide access to a professional support unit or equivalent for students requiring additional support.

It is the responsibility of the HEI to ensure that any individuals involved in assessing a PA student, either at the HEI or on placement, are trained in ED&I.

Supervision and educator roles

PA education is a collaboration between students, tutors and supervisors, and while there are many possible approaches to supervision and educator roles, there are a number of important requirements that must be met to ensure safety and quality.

There should be an individual responsible for the supervision and management of a student's educational progress throughout the course. They should meet the student regularly to help plan their education, review progress and achieve agreed learning outcomes.

¹⁰The Equality Act 2010 (viewable at www.legislation.gov.uk/ukpga/2010/15/contents) does not apply to Northern Ireland. You can find more information about the equality legislation in Northern Ireland on the Equality Commission for Northern Ireland's website at www.equalityni.org.

It is essential that there is good communication between course providers and placement providers. There should be a designated person in each organisation responsible for liaison with the other organisation.

Requirements for assessors and examiners at the HEI

Course providers should provide guidance about the nature, role and responsibilities of assessors and examiners.

They should:

- > set out appropriate requirements and guidance to enable assessors and examiners to make professional judgements about learners' performance and behaviour to an agreed standard
- > have clear and regular processes for calibrating and benchmarking examiners so they assess to agreed standards, and for reviewing their performance
- > make sure that assessors and examiners are able to distinguish consistently between different levels of performance and behaviour
- > indicate where professional development is required, including on the equality and diversity issues that are relevant to their role as assessors and fair decision-making
- > ensure that all clinical professionals are in good standing with their professional body.

Assessors and examiners may be selected from any appropriate profession including doctors, PAs and other healthcare professions.

Supervision of students on placement

Placement providers must ensure that supervisors and trainers are appropriately trained and supported.

In general, any professional in a placement location who is competent to do so may train, supervise and assess a PA student in a particular skill, procedure or competence. This includes practising PAs, nurses and other healthcare professionals.

However, at each placement location there should be an individual with overall responsibility for the safety, wellbeing and education of PA students in that place. That individual should:

- > make themselves known to the students during their placements
- > have a direct line of contact with the HEI
- > be familiar with this curriculum.

A supervisor's report should be completed for each student on each placement. This should be completed collaboratively between the student and their supervisor.

Feedback and reflection

Good feedback is timely, accurate, honest, fair, specific, constructive and should consider the expected level of performance of the student. Students should engage regularly in feedback dialogue with tutors and clinical supervisors and other relevant healthcare professionals during placements.

Feedback conversations must be conducted sensitively, and participants should recognise cultural differences in the way they are conducted. However, it is vital that all students, whatever their background, should understand the importance of the feedback process and supervisors must make this explicit at introductory meetings.

Verbal feedback dialogue should happen as a regular part of day-to-day experiential learning and, in this form, is invaluable as a measure of current against previous performance. Good feedback will include an action plan for future development.

Formal feedback should be recorded in the portfolio to be used as evidence of learning. Such feedback encounters would generally occur in private, to provide the student with an opportunity to reflect on the encounter, the feedback itself and to ask questions if needed. It should be noted, however, that the feedback conversation is often more detailed and nuanced than the written record and it is therefore the encounter that is likely to be more useful to the student in terms of professional development than the written record.

Advice on feedback can be found within the Academy of Medical Royal Colleges *Improving feedback and reflection to improve learning. A practical guide for trainees and trainers* document.¹¹

The reflective practitioner, developed jointly by the Academy of Medical Royal Colleges, the UK Conference of Postgraduate Medical Deans (COPMed), the GMC and the Medical Schools Council, states that:

Medicine is a lifelong journey, immensely rich, scientifically complex and constantly developing. It is characterised by positive, fulfilling experiences and feedback, but also involves uncertainty and the emotional intensity of supporting colleagues and patients.

*Reflecting on these experiences is vital to personal wellbeing and development, and to improving the quality of patient care. Experiences, good and bad, have learning for the individuals involved and for the wider system.*¹²

This curriculum endorses the importance of reflection by PA students as a means of internalising learning and improving the care that they provide to patients. Reflection can be carried out in a variety of ways and some evidence of this should be recorded in the portfolio.

Record keeping

The importance of keeping a record of professional development activities and reflecting on them is set out in the GMC's *Good medical practice*.¹³ Seeking feedback dialogues with others and reflecting on them is the cornerstone of strengthened medical appraisal and required of PAs, at all levels and in all roles, by the GMC to demonstrate ongoing fitness to practise.

PA course providers should support their students by providing a means to keep records of their learning and assessment, ideally in a single system or portfolio. It should be maintained jointly with

¹¹ www.aomrc.org.uk/reports-guidance/improving-feedback-reflection-improve-learning-practical-guide-trainees-trainers/ [Accessed 27 July 2022].

¹² www.gmc-uk.org/education/standards-guidance-and-curricula/guidance/reflective-practice/the-reflective-practitioner---guidance-for-doctors-and-medical-students [Accessed 27 July 2022].

¹³ <https://www.gmc-uk.org/ethical-guidance/good-medical-practice-2024/get-to-know-good-medical-practice-2024> [Accessed 26 September 2023].

input from the student themselves, their tutors, supervisors and other appropriate healthcare professionals.

The record should include:

- > evidence that they have demonstrated the CiPs and achieved the outcomes in this curriculum
- > coursework, tutor reports and feedback
- > attendance at workplace-based placements
- > reflection on clinical and professional experiences
- > procedures completed, observed practice (eg Mini-CEx) and supervised learning events
- > supervisor reports and sign-off of placements
- > training certificates (for example BLS, ILS, IR(ME)R).

Clinical placements

To develop clinical competence, it is essential that PA students have opportunities to gain practical and experiential learning from multiple educational approaches. This **must** include clinical placements and should include HEI-based training, for example in clinical skills labs or simulation.

Range and diversity of placements

It is important that PA students gain experience across a range of settings and different types of care. They should have the opportunity to provide care for patients, with appropriate supervision, from the major population groups, including older people, women and children, and patients with diverse backgrounds and experiences.

PA courses **must** offer a programme of clinical placements that ensures coverage of medicine (acute and emergency, and general medicine), surgery, mental health and primary and community care. Such placements should be of sufficient duration to enable students to develop the required capabilities.

While it is essential that a broad range of clinical placement experience is available to PA students, course providers need not be restricted to traditional approaches to placements, provided the appropriate support and safeguards are in place and that the educational value is clear.

Placement requirements and supervision

It is the responsibility of the HEI to ensure that all placements meet the standards set out in *Promoting excellence*. The placement provider must demonstrate that they meet the standards and engage with the HEI's quality management processes. The GMC will check this through their quality assurance processes.

Course providers should consider the impact of different placement environments on students with different backgrounds and offer support where necessary.

Supervisor reports are an essential tool for forming judgements on the progress of PA students. Towards the end of each placement, the student and their placement supervisor should meet to complete a review of the student's performance and progress in the placement.

When beginning a clinical placement for the first time, or when moving into a new placement area, students may spend some time observing before taking a more active role. However, it is expected that PA students will spend little time in a strictly observational role (level 1) and will move to a

supervised active role throughout the remainder of the education programme. The level of supervision is expected to decrease from direct (level 2) to indirect (level 3) supervision as an individual student gains experience in a specified area of work. Despite the level of supervision required, all patient care must be reviewed by the supervising named doctor or healthcare professional.

Level 1	Observation only No provision of clinical care
Level 2	Acting with direct supervision The PA student may provide shared clinical care, but the supervising doctor or healthcare professional is physically within the same clinical area, observing the student's activity and available to provide immediate assistance if required. All patients must be presented to and reviewed by the doctor or healthcare professional
Level 3	Acting with indirect supervision The PA student may provide clinical care when the supervising doctor or healthcare professional is not physically in the same immediate clinical area but is available, as required, to provide direct supervision. All patients of a PA student must be presented to and reviewed by the doctor or healthcare professional

Assessment

The purpose of assessment is to determine the learner's attainment of curriculum outcomes (CiPs) and must promote trust in the public that registered PAs have reached a required standard.

To complete their course, a PA should have demonstrated the required knowledge, skills and behaviours through a range of assessments to evidence achievement of the CiPs.

To enable this, PA course providers should develop, deploy and maintain a programme of assessment using the following guidance. It is up to each course provider to determine the programme of assessment that is appropriate for their course, providing it follows this guidance.

In general, assessments must:

- > have a positive educational impact
- > be able to identify when a learner has achieved the curriculum requirements
- > discriminate effectively between different levels of performance
- > be fair, achievable and proportionate.

The programme assessment structure should:

- > have clear progression requirements
- > include formative and summative assessments
- > provide feedback on performance to candidates, linked to learning outcomes
- > have policies for reasonable adjustments and differential attainment.

Using a wide range of assessment can enhance student learning. The programme of assessment should include a range of assessment methods, each of which should be selected based on the learning objectives being tested. Certain assessment methods are better suited to testing different types of knowledge, skills and behaviours.

Course providers should support students to become familiar with the assessment methods used in their programme.

Assessment development

Course providers should be able to demonstrate how the programme of assessment for the course has been developed and links to curriculum outcomes, and provide a rationale for key decisions.

They should be able to describe clearly how assessments that contribute to decisions about a learner's progress (summative assessments) have been:

- > selected and integrated to produce valid and reliable judgements
- > produced so the purpose of each individual element within the programme of assessment and its contribution to the programme of assessment as a whole is clear, and the overall assessment burden is proportionate
- > subject to appropriate validation or piloting
- > blueprinted to the learning outcomes described in this curriculum, so it is clear how and when learning outcomes are demonstrated
- > sequenced and applied across the curriculum to ensure patient and training safety
- > appropriately standard set to clearly describe expected levels of performance, using a methodology that is consistent, robust and fair over time
- > supported by appropriate guidance for learners, examiners and assessors so that assessments are conducted consistently and fairly.

They should also:

- > provide guidance on how poor performance should be managed, including advice on addressing underperformance safely and fairly and making sure that concerns about performance are escalated appropriately
- > integrate information about the learner's performance across the programme of assessment to evidence completion of the training programme
- > provide a rationale that explains the impact of the assessments, including on PAs who share protected characteristics.

Monitoring the quality of the programme of assessment

Course providers should monitor and continuously improve the quality of their assessments.

They may be asked to provide data about their assessments to meet regulatory requirements for quality management and quality assurance processes.

Where appropriate, they should publish the quality performance metrics of assessments to promote transparency and openness.