

Working as a Physician Associate in Primary Care

Why should you consider a role in General Practice in Bedfordshire, Luton & Milton Keynes?

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This document will give you an overview of the following:

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The basics of working in Primary Care

Who are you working for?

A primary care network (PCN) consists of groups of general practices working together with a range of local providers in order to provide more personalised, coordinated health and social care to their local populations. Networks would normally be based around natural local communities typically serving populations of at least 30,000.

Many advertisements will tell you if they are recruiting for an individual practice (the traditional manner) or for the network.

- a. If you work for one practice your supervision is held with them and you work for them only.
- b. If you work for the network the lead practice will be responsible for you however you may work across several different practices.

To find out more about PCNs and Practices in BLMK visit:
<https://work-learn-live-blmk.co.uk/pcns-in-blmk/>

What is your role in General Practice?

- Patient consultations: same day acute illness and booked routine appointments
- Telephone consultations
- Residential, nursing and home visits
- Managing chronic conditions lists (such as COPD or diabetes patients)
- Running specific clinics – with training (sexual health, family planning or minor surgery)
- Reviewing, analysing and actioning diagnostic test results
- Support to meet clinical targets (QoF)
- Providing health/disease promotion and prevention advice for patients

What do you offer the MDT?

1. **Continuity** – as many trainees with change through rotations, some GP trainees may not stay on in that specific practice. You will be a long-term member of the team.
2. **Consistency** – Forming relationships with patients and colleagues because you are a long-term member of the team. This also means you can have other opportunities to have students sit in with you or take time out to help with trainee doctor inductions, as you will be most familiar with the practice.
3. **Skill mix** – MDTs are made of all different types of clinicians ANPs, NPs, paramedics, physios and each one bring a different skill mix. As PAs we are taught in the medical manner and from day 1 you will be able to see most common conditions and as time goes on your skills will expand.

To find out about other new roles visit:
<https://work-learn-live-blmk.co.uk/new-roles-in-primary-care/>

Your Professional Development

Your Supervision

This will evolve as you stay in primary care. However many PAs worry about the support they will get from primary care and that it will be less than that in secondary care, this isn't true. It can be daunting to imagine being alone in a clinic room with a patient but help is next door and doctors, nurses and reception will be available to help you.

Initially during the first 2 weeks of induction you will sit in with all the different clinicians and become familiar with the MDT. You will often have to conduct a few sessions yourself with a GP sat in with you, usually to offer you some support with using the system software and for any queries you may have. Starting out you will be on 30 minute appointments with a delegated GP supervisor to debrief each patient. However as times progresses and this can vary from 3-6 months, your appointment times will reduce to 15 minutes and you will debrief after your morning and afternoon session. Of course if you have any concerns in relation to any patient you can seek advice from the duty doctor, they are there to support you.

Be sure to clarify your level of supervision when applying for jobs and don't hesitate to ask this during interviews.



Indemnity: Physician associates require professional indemnity coverage in order to practice in the UK. The cost of this coverage is paid for by the employer, it is worth clarifying if this is not clear in the applications. Currently, the Medical Protection Society (MPS), Medical Defence Union (MDU) and Medical and Dental Defence Union of Scotland (MDDUS) will provide professional indemnity for physician associates working in general practice.

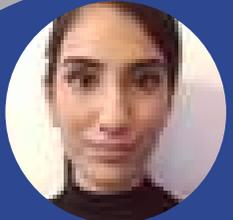
Your CPD

All physician associates are currently required to complete 50 hours of CPD per year.

- In primary care you are often given 5 study days in addition to your usual annual leave. Make the most of the 5 days to take part in CPD accredited conferences such as The Faculty of Physician Associated National Conference, Pulse Live or Red Whale.
- Some practices require you to do Blue Stream training which covers mandatory training on anaphylaxis, CPR and even safeguarding to name a few. This counts as your CPD and you receive certificates
- The Royal College of Physicians is a good website to search for local or even specialty type conferences. They often live stream their events as well allowing you achieve some CPD this way.
- You have the opportunity to see so many patients in primary care. You can follow these patients up and simply task yourself – at a later date you can create a CPD over this patient.

Salary: Typically a newly qualified PA will start on a Band 6 (£31,696). Under the [Additional Roles Reimbursement Scheme](#), PAs in Primary Care can start on a Band 7 (£38,890)

A Day in the life of a PA



Mehreen Shafiq
Primary Care Physician
Associate & BLMK
Training Hub PA
Ambassador

My typical day starts at 10 where I begin with my telephone consultations and I decide who I can manage on the phone and who needs to be seen in my clinic at the end of my morning. Towards the end of the clinic I have face-to-face slots so I bring in any of the patients I have spoken to on the phone that I feel I need to see .
My list is always triaged and therefore patients are appropriate for me to manage.
At the end of my clinic I have a debrief session with a GP.

When I need a prescription I will often raise this electronically and add it to the list for duty doctor to sign with a tasked message so they are aware.

At 13:00-14:30 I have a lunch break and will file my pathology results, imaging and sometimes call up patients to inform them of blood results.

At 14:30 I start my afternoon clinic, with similar telephone calls and face-to-face appointments at the end. At the end of my afternoon I will debrief again with a clinician and I have 30 minutes before I leave to do some admin work – referrals and actioning any pathology results again, I end my day at 18:00.

At the beginning I took a long time with each patient because I was still honing in on my clinical skills. My clinics started off longer per patient and this allowed me to become much more familiar with my role and become quicker with each patient. I had a supervising GP and we had time at the end of my clinic to discuss any difficult patients

Any urgent cases I will see the GP between patients or, more usually, I will wait until debrief to discuss any complex patients. This gives me a chance to decide on my management plan.

Although most PA roles in general practice are similar there might be some differences. For instance in my first primary care job I took part in several audits and I would do home-visits. I don't currently do these in my current job because the practice does not have a need for me to do so. It is therefore important to discuss what the role will entail and perhaps discuss opportunities you may want. I have just learned how to insert, remove and replace pessary's and I will be doing a gynaecology diploma next year so I can start gynaecology clinics. There is always the option to progress.

Benefits of working in Primary Care

Your impact

Working for a network or a practice means there is greater accessibility to appointments, less pressure on the duty/on-call doctor, improved prescribing rates in certain areas, a permanent member of staff who can act as a point of contact for locum GPs and teaching and shadowing opportunities for nurses and pharmacists undertaking advanced practice studies. With statutory regulation in the pipeline, the future is looking bright for PAs in primary care!

Career stability

Many PAs once established in their practice can go on and develop other skills and competencies. If you have an interest in minor surgery and the practice/network have a need you could be trained to that level to do so.



Job satisfaction

You can develop long-term relationships with your patients that can span more than one generation. You get to see them grow up, progress through life and perhaps start families of their own. Furthermore, many practicing PAs highlight the sheer variety as one of the key things they enjoy about their work, two days are never the same.

Flexibility

There is benefit of being able to work part-time and do additional roles such as teaching, becoming an ambassador or work in secondary care as well. The hours can be adapted to best suit your lifestyle. I work 10:00 – 18:00 however my colleague works 8:30-16:30, meaning you can balance your social and work life effectively without letting it consume you.

Benefits of working in BLMK

What is the BLMK Primary Care Training Hub?

BLMK Primary Care Training Hub exists to tailor and develop innovative education, training, leadership & workforce transformation initiatives for all our Primary Care Workforce across BLMK. We work with Practices and PCNs to identify and facilitate an enhanced offer of support, education and career development for all staff at any stage of their career. By joining BLMK you will have the opportunity to access this offer and join a social movement that recognises that our power comes from our people, and enables everyone to be thriving in their work, flourishing in their wellbeing and flying in their professional development. We are innovative in our approach and create initiatives based on the needs of our local workforce. We are trailblazers, often leading the way nationally for piloting the future approaches to ways of working, making Primary Care in BLMK the best place to work. We tailor nationally funded initiatives from NHS England & Improvement and Health Education England and are part of the wider BLMK Workforce Development Academy which collaborates to create synergies in opportunity across the wider health and social care sector.

What can the Training Hub offer to you?

Peer Support Networks

You will be part of the BLMK Primary Care PA network where you can get support & expertise

Career development opportunities

As you become more experienced you will have access to career progression and portfolio opportunities for PAs.

CPD & Training Programmes

We offer bespoke and multi-disciplinary training & education designed to help embed and develop in Primary Care.

Integrated Working & Learning

We bring secondary & primary care to work together and offer rotational placements & shared Learning.

Wellbeing support

You will have access to wellbeing support including the Shiny Mind App which supports resilience and stress management

Positive & empowering culture

We work with PCNs & Practices in inducting, embedding and growing new and existing talent.

Wider system experience

You will have access to shadowing opportunities such as 'Stepping into my Shoes' to see what others do in their roles.

This information is just a snapshot of the support and opportunities available. To find out more visit:

<https://work-learn-live-blmk.co.uk/training-hub>

**or follow us on Twitter to keep up to date:
[@HubBLMK](https://twitter.com/HubBLMK)**