

## Medical Associate Professions – commission to NHS Education Scotland

1. To ensure sustainability of healthcare for the future, we must plan ahead to deal with increasing demands on services, an ageing workforce, worldwide shortages in some professions and specialties and the impact of Brexit.
2. The NHS Recovery Plan was published on 25 August 2021, committing over £1 billion of targeted investment for the recovery and renewal of our health service. A key requirement to delivering the Recovery Plan is having the right workforce in place at the right time.
3. Additionally, the resultant demand for planned care has intensified the need to bring forward recruitment for the National Treatment Centres (NTC) to enable them to operate at capacity sooner than originally planned. Current projections for the NTC programme assume at least an additional c. 1500 WTE staff (across all disciplines including a number of surgical and clinical specialties, nursing and AHP roles) by 2025/26.
4. Medical Associate Profession (MAP) roles, have been identified as potential alternative workforce options to build in flexibility and resilience to teams and to contribute to the increase in clinical capacity that is essential to meet current and future demand.
5. MAP roles include;
  - a. Physician Associate (PA)
  - b. Anaesthesia Associate (AA)
  - c. Surgical Care Practitioner (SCP)
  - d. Advanced Critical Care Practitioner (ACCP)
6. Currently there is no strategic national consensus and approach to the development of the Medical Associate Profession (MAPs) workforce in Scotland and where they can contribute. This is an area of the workforce that has grown organically over the last 10 years, driven by local need and planning. There is also an absence of educational infrastructure and agreed funding models and routes.

### 7. **Current workforce data;**

NES data team are currently unable to provide aggregated data on the current number of Surgical Care Practitioners and Advanced Critical Care Practitioners in service as they do not belong to one particular sub job family within current workforce / payroll systems.

In 2019 the CNO team drafted guidance (unpublished to date) for Boards on the employment of PA and AA. As part of this development they sought information from Boards on current workforce numbers of each role and found the following;

Nine Boards indicated employment of either a PA or AA (or both). At the time at which the responses were provided (fourth quarter of 2019), there were:

- a. A total of 71 PA employees (at all bands, including trainees)
- b. A total of 14 AA employees reported by boards (plus an additional two currently undertaking a university course with funding)

### 8. **Existing local initiatives and responses**

NHS Grampian have led the development of PA's in Scotland and commissioned the first and only education programme from Aberdeen University. The Board now employs in the region of 30 PA's across a number of specialties. Now in its 10<sup>th</sup> year, the Aberdeen MSc programme attracts around up to 20 applicants a year.

In 2017 NHS Highland recruited four PA students directly from the Aberdeen University programme under Annex U of Agenda for Change as an alternative approach to building their PA workforce. Three are now successfully working across the medical and surgical divisions in Raigmore Hospital.

The South East Region coordinated a recruitment drive in 2019 and successfully recruited in the region of 12 experienced PA's. These were predominately staff working in NHS England who were seeking a return to Scotland and also included a small number of PA's within Scottish Boards. They are currently recruiting in the region of an additional 30 PA's.

## 9. Existing educational programmes;

**PA:** There are a significant number of PA education programmes in England with Aberdeen University the only Scottish provider. Health Education England (HEE) is currently exploring a modern apprenticeship model for PA development which may afford some flexibility in the future. HEE have also developed apprenticeship standards for PA and are launching an Apprenticeship Consultation Group in September 2021 to support the development of a collaborative national implementation plan for the PA Apprenticeship.

**AA:** The University of Birmingham is the only University in the UK offering an Anaesthesia Assistant Postgraduate Diploma. This can be undertaken at distance.

**SCP:** Three English Universities currently offer 2 year MSc Programmes.

**ACCP:** Four English Universities currently offer PGDip and MSc Programmes

## 10. Commission to NHS Education Scotland

- a. The Scottish Government seeks to commission NES to undertake a service needs analysis to map current and future demand for these roles across Scotland. This should include, where possible, an exploration of the additionality of these roles. By which we mean what is the anticipated additional workforce entering NHS Scotland through these routes and what component of that is existing staff retraining. E.g. Registered Nurse or Paramedic undertaking PA programme. The risk here is that there may be an assumption of additionality where the opposite is the case. Increasing training and numbers of certain MAPs roles may also adversely impact other health workforce professions where shortages and vacancies are already an issue<sup>1</sup>.
- b. This should be followed by an educational needs analysis with a focus on the possibilities of adaptation and collaboration with any existing provider(s).

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<sup>1</sup> Surgical Care Practitioners must have either a Registered Nurse or Operating Department Practitioner qualification to be eligible to undertake SCP educational programmes and therefore are not providing additionality to the service.

Data on the background of other MAPs is available e.g. annual PA census and university application data. The following is an excerpt from the Faculty of PA 2020 survey. Note that the results apply to the whole of the UK and Scottish data will be different<sup>1</sup>.

*56% of respondents had healthcare experience across 38 different roles before becoming a PA. Among them, the most common (38%) was as a healthcare assistant with 148 respondents, followed by volunteer in a healthcare setting (64 respondents), nurse or clinical laboratory technician (36 respondents each). 7% of respondents with previous healthcare experience had prescribing rights in their previous role<sup>1</sup>.*

Aberdeen University have been asked to provide data specific to entrants to their programme over the last 5 years.

- c. This is within the context of a number of risks listed below, which have been identified by a short life working group (membership is listed in Appendix I); convened through the Centre for Sustainable Delivery.
- i. The absence of robust workforce data for planning purposes and to inform service and educational needs.
  - ii. Capacity within the current workforce to provide clinical and educational supervision for additional MAP and trainee MAP numbers. This has been exacerbated by the Covid pandemic. Boards with experience of supporting MAP students have a role to play to share their learning with other, less experienced Boards.
  - iii. The relative inflexibility of the current annual process of entry and exit from educational programmes.
  - iv. Current funding structures / absence of.
  - v. Delayed regulation of PA and AA roles nationally with associated prescribing and ionising radiology requesting rights.
  - vi. Patient safety and naming conventions. In 2019, the Physician Associate (Anaesthesia) role became known as Anaesthesia Associate. Consultation on this change was limited. In Scotland there is an Anaesthetic Assistant role which is typically a Band 5 post that assists Anaesthetists from induction to theatre recovery. Such similarity in naming convention is confusing with potential risks to patient safety. As Scotland is the only country within the UK to have an Anaesthetic Assistant role, it will be necessary to review this role with a view to changing.
- d. The Scottish Government, through the Capacity Building and Recruitment Strategy Unit, will support this commission with the following resource to NES;
- £70,035 for a Band 8A Programme Manager for a maximum of 12 months  
£35,051 for Band 4 Business Support

**Total £ 105,086**

## Appendix I

### Membership of MAP short life working group 2021

██████████	National Associate Director – Strategic Planning and Programmes, CfSD
██████████	Associate Clinical Director, CfSD
██████████	Director NMAHP, NES
██████████	Head of Programme NMAHP, NES
██████████	Deputy Medical Director NES
██████████	Director, NHS Scotland Academy
██████████	Head of Unit, Operational Support and Sponsorship Unit, Scottish Government
██████████	NES Sponsorship Manager, Operational Support and Sponsorship Unit, Scottish Government
██████████	Professional Regulatory Advisor, Chief Nursing Officer Directorate, Scottish Government
██████████	Acting Head of Medical Education and Training Unit, Health Workforce, Scottish Government
██████████	Programme Manager, Capacity Building and Recruitment Strategy Unit, Health Workforce, Scottish Government