



Integrated Care Board meeting, 31 January 2024 Questions received from the public with responses from the ICB

Question 1

I am extremely concerned about the use and the rapid expansion of medical associate professionals (MAPs), encompassing physician associates(PAs), anaesthesia associates(AAs), and surgical care practitioners(SPS), in both hospital and general practice settings. I believe that their medical training is only for 2 years. Whereas any doctor working in the NHS is between 5 -7yrs and often even longer when specialising. Doctors when in training all have at least 2yrs or more working with patients while training, usually working under a consultant.

The British Medical Council (BMA) have made many requests to slow down the use of MAPs as they do not have medical degrees and do not have the extensive training and depth of knowledge that doctors do. I have found the case of two deaths that have occurred because of a missed diagnoses by PAs (see below) and I'm sure that other major issues can be found.

The BMA, which has also fought a long campaign against the regulation of PAs by the GMC who also regulate doctors. Patients can't tell the difference between a PA and a doctor and giving PAs a GMC number would increase ambiguity.

I Have spoken to many people who have not even heard of a PA in general practice and were very surprised to know that they could have been seen by a non doctor!! Doctors are also complaining that supervision of PAs is taking up their precious time.

QUESTIONS

- 1) How do patience know when they are seeing a PA instead of a doctor? In my practice I am given the name of the doctor that I am seeing ie Dr Smith. How would a PA be presented?
- 2) How many PAs are to be found in SElondonICS
- 3) Is there access to a list of PAs at local surgeries
- 4) Are PAs used in hospitals? and how are they recognised?

I feel that the expansion of MAPs will be yet another step leading to a 2 tier system within our NHS. Many people are now paying for private health care. What's going to happen to those who can't afford to of this.

Response

Physician associates (PAs) are healthcare professionals with a generalist medical education providing medical care as an integral part of the multidisciplinary team that make up modern general practice teams and valuable asset along with Practice nurses, health care assistants, Clinical Pharmacists, First contact physiotherapists and GPs

• PAs work under the supervision of a named senior doctor (such as a General Practitioner) but can work autonomously with appropriate support. Physician Associates are part of the medical associate professions (MAPs) grouping in the health workforce and have been working in the UK since 2003.





	PAs can be found working in primary and secondary care across 20 specialty areas in the UK such as medicine,
	general practice, surgery and emergency medicine.
	 PAs trained in the UK have undertaken postgraduate medical training in PA studies spread over a period of at least 90 weeks (approximately 3,200 hours, divided into 1,600 hours of theory and 1,600 hours of clinical practice). This is an intensive two-year course based on the Competence and Curriculum Framework for the PA,
	consisting of theoretical learning in medical sciences, pharmacology and clinical reasoning, as well as clinical placement experience in a wide variety of settings. To enrol on a PA programme, students must already hold an undergraduate degree, usually in a biomedical or health/ life science field and have some prior health or social care experience.
	 In South East London we have 55 Physician Associates working in general practice in a range of different roles through the additional roles scheme.
	 Physician Associates, like any other professional in general practice, would introduce themselves to patients and explain their role at the start of a consultation.
	Each practice in South East London has their own website where they will introduce their team including the
	additional roles such as Physician Associates. SEL ICB have also produced a 'Meet your primary care team'
	website Live in south east London? Meet your Primary Care team. (selprimarycare.co.uk)
Question 2	Back in February 2023 and April 2023 questions were asked about patient input and ICB monitoring of APMS contracts
Question 2	back in 1 cordary 2020 and April 2020 questions were asked about patient input and 100 monitoring of Ar we contracts
	You stated that "There is no provision in the APMS contract allowing large companies being excluded from bidding, based on their size. However, all contracts, regardless of their form are monitored and assured using the same standards"
	Centene surgeries have recently been sold on, and there are reports of surgeries, specifically one in North London, where
	inappropriate use of staff has led to very serious consequences. Can you reassure South East London patients that this will not happen here? Can you outline how you will do this?
Response	SEL ICB has received a change of control request for 7 general practice services contracts held by AT Medics across South
	East London. The change of control arises from the proposed sale of Operose Health, a parent company of the contract
	holders. If a change of control takes place, there will be no change to:
	The legal entity holding the APMS contracts (AT Medics Ltd) The teams that deliver the APMS contracts.
	 The teams that deliver the APMS contracts The specification of services commissioned under the APMS contracts
	The specification of services commissioned under the APMS contracts
	All practices in South East London are contracted to provide services through one of three nationally agreed contracts,
	General Medical Services, Personal Medical Services or Alternative Provider Medical Services. All three of these contracts
	require the practices to meet a number of clauses which includes ensuring the medical practitioner has the relevant





qualifications, is registered with an appropriate professional body, has provided two clinical references, has the appropriate clinical experience and training necessary to deliver the service. The contract also requires the practice to ensure that there are arrangements in place to maintain and update the skills and knowledge of the health care professionals performing or assisting in the delivery of services. We are therefore confident that there is a contract in place that requires practices to ensure that the most appropriate health care professional is providing services to their patients.

Whether owned by GPs or other organisations, all practices must be able to meet strict standards and regulations that apply to all NHS providers. This change in control does not relate to the day-to-day running of the AT Medics GP surgeries. Patients will still be seen by the same doctors, nurses and administrations teams as they do now and should continue to access our surgeries as they currently do.

As a commissioner of health services, it is NHS South East London ICB's role to ensure the provision of high quality, safe services for local people. In addition, all health service providers are regulated and inspected by the Care Quality Commission to ensure they meet fundamental quality standards that are safe, effective, caring, responsive and well-led, and take action where they do not.