

# PA (PA) Primary Care Preceptorship Year – guidance

1 September 2023, Version 1.3

## Introduction

As part of the nationally agreed funding model introduced in 2018, NHS England (NHSE) funds a £5,000 incentive payment through a preceptorship model for each physician associate trainee employed in a primary care provider after completing education. This is paid to the primary care provider (GP Practice/PCN) with the expectation that the employer will provide preceptorship support and supervision in return. The following conditions apply:

- provider is employing a physician associate (PA) into their **first role** in primary care (see point '2' below), and;
- provider delivers a structured preceptorship programme which meets NHSE Primary Care Preceptorship Year guidance criteria outlined below.

## NHSE Preceptorship Criteria

1. The preceptorship programme will be undertaken for a minimum of 1 year [whole time equivalent] and must entail a minimum of 50% [or 6 months' full time equivalent in any rotation of placements] being spent in Primary Care.
2. The Preceptorship is only being offered to either a) a PA who is commencing a programme in the first twelve months of practice after first gaining registration on the national register or b) a PA taking up their first post in primary care since gaining registration. This would also include the transition of PAs from secondary care.
3. The Employer must have read, understood and be prepared to implement the guidance within the [Faculty of Physician Associates \(FPA\) document 'Employers' Guide to Physician Associates.'](#)
4. The weekly timetable must include at least one dedicated session for education.

- The PA preceptee must work under GP clinical supervision during their day-to-day clinical practice. They must also have access to a GP Clinical Supervisor to support their professional development and undertaking of any portfolio-based assessments (GP CS training available if not accredited at time of appointment of PA).
5. The Preceptee must have access to a trained mentor for the duration of the Preceptorship. The designated mentor must not hold the roles of a line manager, clinical supervisor, or educational supervisor, for the individual, and should not have direct involvement in their day-to-day responsibilities. It is recommended that the mentor is from a different department or organisation.
  6. If being employed by a PCN, the PA Preceptee must work in no more than 2 practices for the first 6 months of their Preceptorship year.
  7. The preceptee must have a suitable induction period, an induction meeting with their supervisor, a mid-point and an end of programme review with their supervisor [regardless of whether they have been a PA student on placement with the practice]. A [template preceptorship induction plan can be found here](#) under 'useful resources' entitled 'GP Supervisor and Physician Associate Guide'.
  8. The programme must use suitable supportive records of the preceptor's progress. For example, the FPAs ['First Year Post Qualification Documentation' which can be accessed under 'Employer Resources'](#).
  9. The preceptee must take part in the employer's annual appraisal system.
  10. Should offer an approved structured development plan with clear objectives, goals and a shared understanding around how the practice will support the preceptee to gain the clinical experience and skills required. For example, this could be from a local HEI or equivalent, which will include alumni activity or could also be in-house (or could be in-network).
  11. The preceptorship programme will set out expected outcomes for the preceptee in the form of competence acquisition or a brief curriculum which may be locally derived but based on established national guidance. This can be found within the FPA document; First Year Post Qualification Documentation.
  12. The preceptorship programme must enable the post-holder to engage in multi-professional learning activities with protected time to ensure this.
  13. Where the post-holder's objectives include a further course of study, this should usually be funded from the support payment. This could be up to the cost of a postgraduate

certificate qualification if appropriate for the preceptor and the service context; this funding should be used flexibly to meet the needs of the preceptor.

14. Individual post-holders will be expected to complete and maintain all of the requirements of the UK PA Managed Voluntary Register (PAMVR) or subsequent register.
15. At the start of employment, newly qualified PAs in Primary Care should have 30-minute patient consultation time allocation with a debrief after each patient. This should be reviewed between 3-6 months and the consultation time adjusted as appropriate.
16. Employers must consider a rota with a maximum of eight patient-facing clinical sessions a week for the first six months of the Preceptorship programme.

## Application process

Following acceptance of the above criteria, employing organisations will need to contact their relevant NHSE office via the following details to begin the application process:

- North East and North Cumbria: [england.advancedpractice.ne@nhs.net](mailto:england.advancedpractice.ne@nhs.net)
- Yorkshire and the Humber: [england.maps.ney@nhs.net](mailto:england.maps.ney@nhs.net)
- North West: [england.physicianassociates.nw@nhs.net](mailto:england.physicianassociates.nw@nhs.net)
- Midlands: [england.midlandsprimarycareschool@nhs.net](mailto:england.midlandsprimarycareschool@nhs.net)
- East of England: [england.primarycare.eoe@nhs.net](mailto:england.primarycare.eoe@nhs.net)
- London: [england.palondon@nhs.net](mailto:england.palondon@nhs.net)
- South East: [sepaschool.tvw@royalberkshire.nhs.uk](mailto:sepaschool.tvw@royalberkshire.nhs.uk) and/or [kss.schoolofpas@nhs.net](mailto:kss.schoolofpas@nhs.net)
- South West: [england.regionaltraininghubs.sw@nhs.net](mailto:england.regionaltraininghubs.sw@nhs.net)

## Funding

- NHSE shall pay the preceptorship sum to the Employer via agreed local processes
- The preceptorship payment is allocated to employers to support the preceptorship programme, recognising the infrastructure, education and learning requirements and input/supervision/teaching required in the practice setting during the preceptorship
- The Employer will produce invoices for NHSE in order to receive these payments at agreed local arrangements

- If a preceptee resigns from a preceptorship, payments will be adjusted to the date of their resignation and the Employer accepts that preceptorship payments will cease from the date the preceptee leaves the preceptorship/employment
- If a preceptee interrupts their preceptorship due to a period of absence the preceptorship payments will be paused from the month of interruption and will recommence once the preceptee recommenced their preceptorship
- Where applicable, the trust and primary care employer working together shall have appropriate service level agreements in place between them to agree the employment and funding arrangements to support the rotational post(s)

## **Termination of Preceptorship**

- The Employer will inform NHSE at the earliest opportunity if the preceptee no longer wishes to continue the preceptorship and/or the preceptee's employment with the Employer ceases.
- The Employer agrees to repay any excess preceptorship payment received (to be identified by NHSE)
- If the preceptee takes up employment elsewhere the preceptorship funding will no longer be payable to the Employer and will be paid pro rata
- Should NHSE consider that the Employer is not fulfilling its obligations as laid out in the above criteria, NHSE will firstly notify the Employer of its concerns and agree a set time period for the Employer to comply. Should NHSE subsequently consider that the Employer is still not fulfilling its obligations the funding will be withdrawn.