

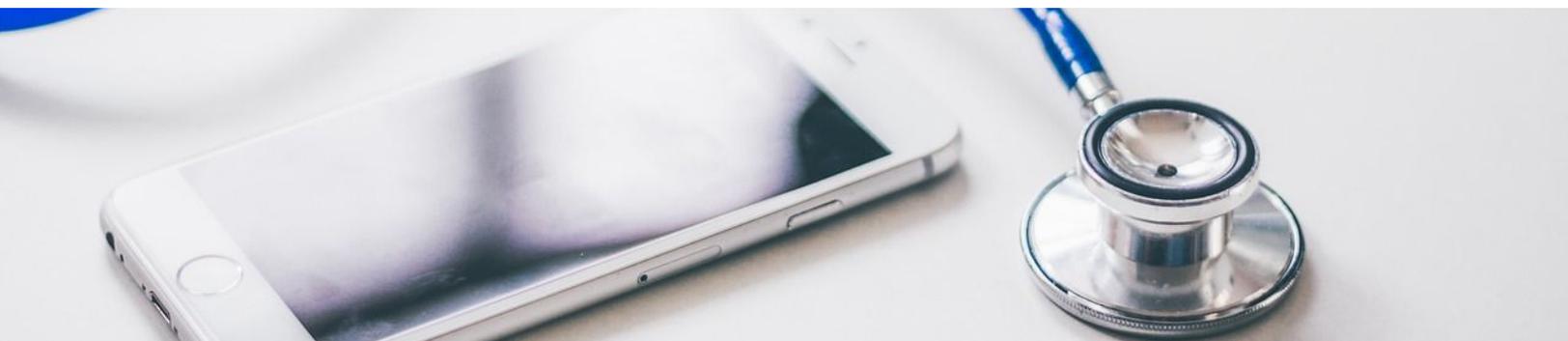
ONTARIO

Hiring a Physician Assistant in Family Medicine

BLUEPRINT



Table of Contents



Introduction	3
Helpful Resources	3
Acknowledgements	4
What are Physician Assistants?	5
How are PAs trained and Certified?	5
What is the PA Scope of Practice?	6
How will hiring a Physician Assistant save me time?	7
Family PA Clinical Duties	7
How PAs have made a difference in their practice:	8
Adding a Physician Assistant to a Family Practice Checklist	10
Step 1: Learn about the PA Profession	10
Step 2: Perform a Clinic/Practice Needs Assessment	10
Step 3: Explore Funding Options for your Physician Assistant	12
Step 4: Post a Job Posting	13
Step 5: Create a PA Contract, hire the PA	14
Step 6: Orientation to the PA to practice	15

Last updated May 16, 2019

Introduction

This is a resource to help provide family physicians a step by step guide to hiring a PA for their family practice to address needs for the clinic.

This document includes an introduction to the PA role, a Clinic Needs Assessment, Funding Options, Job posting, creating a contract, and orienting the PA to a family medicine practice.

Helpful Resources

- [Canadian Association of Physician Assistants](#)
- [CMA PA Toolkit for PA Employers](#)
- [Ontario College of Pharmacists, Ontario Physician Assistant Update](#)
- [CAPA Physician Checklist](#)
- [Canadian PA Practice Profiles](#) - Examples of Canadian PAs working in different specialties

- **McMaster PA Program**
 - Contact Info: https://fhs.mcmaster.ca/physicianassistant/contact_information.html
 - Email: paprogram@mcmaster.ca

- **PA Consortium** (University of Toronto, NOSM, & Michener Institute for Applied Health Sciences)
 - Website: <http://www.paconsortium.ca>
 - Email: physician.assistant@utoronto.ca

Acknowledgements

Thank you to the Ontario Physician Assistants who contributed to creating this document:

Primary Contacts:

- **Andrea Tiwari**, Director of Communications and Stakeholder Relations for the Canadian Association of Physician Assistants
 - Contact via email: atiwari@capa-acam.ca
- **Anne Dang, CCPA**, Physician Assistant in Orthopaedic Surgery and Physiatry
 - Contact via LinkedIn: <https://www.linkedin.com/in/annedang/>
 - Email: anne@canadianpa.ca
- **Deniece O’Leary, PA-C**, Physician Assistant, Physician Assistant in Family medicine
 - Contact via email: denieceoleary@gmail.com
 - Contact via LinkedIn: <https://www.linkedin.com/in/deniece-o-leary-a187364a/>

Contributors:

- **Andrea Filip, CCPA**, Physician Assistant in Family Medicine
- **Andrea Pansoy-Torres, CCPA**, Physician Assistant in Family Medicine
- **Dhanya Varghese, CCPA**, Physician Assistant in Family Medicine
- **Kevin Kitzul, CCPA**, Physician Assistant, Harrow Health Centre FHT
 - Contact via email: kevin.kitzul@gmail.com
 - LinkedIn Profile: <https://www.linkedin.com/in/kevin-kitzul-b9725697/>
- **Laura MacPherson, CCPA**, Physician Assistant in Family Medicine
 - Contact via email: laura.mac@medportal.ca
 - LinkedIn: <https://www.linkedin.com/in/laura-macpherson-ccpa-31688944/>
- **Mizna Zaveri, CCPA**, Physician Assistant in Family Medicine & Cardiology

What are Physician Assistants?

Physician Assistants (PAs) are highly skilled health care professionals educated in the medical model. They graduate from a Baccalaureate or Master's Degree program that may be affiliated with a medical school. PAs practice medicine independently under the supervision of a licensed physician within a patient-centered health care team. PAs can work in any clinic or hospital setting to extend physician services, complement existing services and aid in improving patient access to health care.¹

- **PAs can either be employees of the hospital, family health team, community health centre, or office based (private physician employee)**
- **PAs must work under the direction, supervision and delegated authority² of a physician registered to practice medicine by the College of Physician Surgeons of Ontario (CPSO)**
- **PAs are not authorized to perform Controlled Acts or function independently when providing medical services without approved medical directives or verbal orders**
- **PAs are physician extenders within a team - they are NOT independent practitioners**

How are PAs trained and Certified?

In Canada there are four Physician Assistant Education Programs available through McMaster University, University of Manitoba, the Consortium of PA Education and Canadian Forces Health Training Centre. PAs are trained in the same medical model as physicians. PA programs are 24-26 months in duration, with the first year being a didactic year and second year through clinical rotations. PAs may then complete a Physician Assistant Entry to Practice Certification Exam administered by the Physician Assistant Certification Council of Canada to become a Canadian Certified Physician Assistant (CCPA). PAs must engage in Continuing Professional Development to maintain their certification status.

PAs who were educated and certified by accredited programs in the United States have the designation Physician Assistant-Certified (PA-C) and are also able to practice in Canada. Unlike a physician: however, in Canada PAs do not go on to complete a formal residency but instead directly enter the workforce.¹

¹ CMA Toolkit. <https://www.cma.ca/Assets/assets-library/document/en/advocacy/PA-Toolkit-e.pdf>

² Regulated Health Profession's Act, 'Delegation of a Controlled Act' <https://www.ontario.ca/laws/statute/91r18#BK25>

What is the PA Scope of Practice?

PAs support physicians in a range of health care settings and provide care under the supervision of a physician. A PA's practice mirrors that of the supervising physician (e.g., work is assigned and controlled acts performed are delegated to the PA by the physician). The physician and PA work together to define the duties for the PA and practice parameters which may evolve and change over time.

PAs can, by way of delegated acts, conduct history and physical examination, treat illnesses, assist in surgery, order tests, prescribe medications, and order diagnostic investigations including but not limited to: laboratory and diagnostic imaging; and perform interventions within the scope of their training and experience as long as it is also within the scope of practice of their supervising physician.

The specific duties of the PA vary depending on the individual competencies of the PA, the supervising physician's area of practice, and the types of duties that the supervising physician chooses to assign.

- **It is the responsibility of the supervising physician to:**
 1. **Assign medical tasks**
 2. **Create the process for assigning or delegating the medical services**
 3. **Ensure the appropriate supervision of the PA.**
- **The type of work assigned and delegated, and the extent of direct supervision provided to a PA is dependent on the supervising physician's assessment of the PA's individual competencies, skills and experience.**
- **The supervising physician(s) for whom the PAs are acting as physician extenders are clearly identified in the contract.**
- **When a PA is practicing under the authority of a direct order or a medical directive from a supervising physician, a PA may implement the supervising physician's order or prescription**
 1. **Orders/prescriptions for narcotics or controlled drugs must be co-signed by a supervising physician prior to implementation by a PA.**

EXAMPLE OF A PA ISSUED PRESCRIPTION WRITTEN UNDER DELEGATED AUTHORITY AND PURSUANT TO AN ESTABLISHED MEDICAL DIRECTIVE.

Family Care Clinic
123 Main Street
Toronto, ON
Phone: xxx-xxx-xxxx
Fax: xxx-xxx-xxxx

Date: 11/01/2014

Patient: AT
D.O.B: 08/22/1982
Address: 99 First Ave.

Rx Amoxicillin 500 tid x 10 days
M: 30

Signature: T. Jones PA

Order written under delegation established by medical directive number XXXX as authorized by Dr. P. Smith (CPSO XXXXX)

Figure 1

PAs can prescribe with physician co-signature or through established medical directives. **Figure 1** is an example of a PA prescription with reference to a medical directive³

³ Ontario College of Pharmacists. Ontario's Physician Assistants: An Update.
<http://www.ocpinfo.com/library/practice-related/download/PhysicianAssistant.pdf>

How will hiring a Physician Assistant save me time?

Think of having a PA like having a resident or fellow physician colleague who functions to improve a family physician's workflow, and extend the services you can provide to your patients. Rather than having one provider available for patient appointments, you have two providers working simultaneously, allowing you to increase access to patients, without increasing your personal workload.

Family PA Clinical Duties

PAs practice **medicine** caring for patients of all ages and can manage both acute and chronic conditions. They perform the following tasks:

- Initial new patient visits and follow-up visits
- Assess, diagnose and treat illnesses
- Conduct Physical Examinations (including prenatal exams)
- Patient charting and medical documentation
- Completing of disability, insurance and work forms (e.g. WSIB, Functional Ability Forms, Attending Physician Statements, Employment Insurance Applications, Employee Physicals, Immunization Forms for university and employment, and Pre-op forms)
- Order and interpret diagnostic investigations (e.g. x-rays, ultrasound, blood work, CT scans, etc.)
- Perform diagnostic and therapeutic procedures (e.g. immunizations, PAP smears, joint and soft tissue injections, spirometry, and phlebotomy)
- Chronic Disease Management (e.g. COPD, Asthma, Diabetes and Hypertension) and Atrial Fibrillation (e.g. point of care INR and anticoagulant management).
- Prescribe medications
- Patient education on disease prevention and diagnoses
- Quality Improvement Projects
- Medical teaching (e.g. residents, fellows, PA students, medical students)

How PAs have made a difference in their practice:

Experienced Ontario Physician Assistants explain how they've made a difference in their family practice:

"I work at a family practice, and since adding a PA we have seen several benefits:

- **Increased access to same day or next day appointments.** We have also been able to increase our roster size.
- My supervising physician who is male found many female patients were not completing their screening for cervical cancer at his practice. **I have been able to help the clinic significantly increase pap smear screenings.**
- Patients call in their home blood pressure readings over the week, and I call patients back with adjustments to their BP medications if needed.
- For our Diabetic patients, patients call in their fasting and pre-meal blood sugars for one week and I titrate their insulin over the phone."

- Mizna, CCPA, Physician Assistant in Family Medicine & Cardiology

"In my family practice schedule, I offer about 6 same day appointments and the other 16-18 appointments are booked in advance. These same day appointments, that always fill up, are appreciated by the patients who call with an urgent problem. My supervising physician has a minimum 2-3 weeks wait time to see patients and also has a few same day appointments for urgent issues.

The PA/MD relationship is very respectful and supportive. We discuss complex patients, changing guidelines and resources as needed throughout the week. Since I am an experienced family medicine PA, I can multitask during the day with appointments, referrals, prescription refills, forms and the complex coordination of patient care. As a team, we strive to continue improving the workflow in our practice to benefit patients and our work life balance.

With regards to patient care, once I have seen a patient for a few visits, she requests me to care for her children and her husband. Then these patients frequently refers their mothers, brothers/sisters and their friends. It is an honour to care for patients and know that they are highly recommending my care to others. I am proud to be a valuable member of our health care team.

- Deniece O'Leary MSPA, PA-C, Physician Assistant in Family Medicine

"The PA in our family health team works side by side with our physicians and NPs to provide access to high quality primary care. PA mentors learners and family practice residents as well as collaborating with our allied health professionals to provide workshops and specialized programs."

- Mary Keith, Executive Director, Garden City Family Health Team

"As a physician **working in a busy clinic** where we attempt to cover our colleagues' patients and paperwork in their absences, our PA has **reduced our workload significantly**.

His knowledge base is excellent and **we have trust in him** to review what needs reviewing but **act independently** when feeling confident in his judgement.

Both his **clinical assistance** and his assistance with the unavoidable mundane tasks of lab/imaging review are highly valued."

- **Dr. Tina Stephenson MD Haliburton Highlands Family Health Team**

"I work with [our PA] at the Haliburton FHT. [He] is a **wonderful addition to our team**. He has **excellent assessment skills** and has helped me on numerous occasions with difficult patients."

- **Kathy McLaughlin RNEC, Nurse Practitioner**

"Having a PA in our practice has been terrific! In our setting, our PA does many of our pre-op assessments, well baby visits, well woman visits, acute episodic care, runs our adolescent clinic and, among many other things, manages a group of patients **who identify her as their preferred primary caregiver**. Her excellent work has allowed us as family physicians to work to our "top of scope" focused on our most complicated patients in a way that has optimized continuity and comprehensiveness of care in our **rural environment**. She has become a **very valuable and highly valued member of our team**." - **Dr. Sarah Newbery MD CCFP FCFP Chief of Staff Wilson Memorial General Hospital, Marathon, Ontario**

"Physician Assistants **increase the capacity** of primary care and allows family medicine to provide much **more efficient services** as a result. Adding a physician assistant to our team helped provide **quality care to roster new patients** who were previously without a primary care provider. "

- **Dr. Jason Profetto, MD, Family Physician Hamilton, ON**

Adding a Physician Assistant to a Family Practice Checklist

Step 1: Learn about the PA Profession

- ❑ **What is a PA** and how will they help address challenges in my practice?
- ❑ **Learn about the PA profession** and scope of practice.
 - ❑ PA Training - must be certified (CCPA or PA-C), completed training at an accredited PA School (whether Canadian or American - both can practice in Canada)
 - ❑ [Canadian Association of Physician Assistants](#) (CAPA)
- ❑ **Speak with physician colleagues who have worked with a PA**
 - ❑ Or contact admin@capa-acam.ca or ontariochapterpresident@capa-acam.ca to ask to be connected to a physician who works with a PA

Step 2: Perform a Clinic/Practice Needs Assessment

Find out where the challenges are in your practice and where you need help. Hire the PA with very specific goals in mind to improve your practice.

1. Examples of Clinic/Practice Challenges:

- ❑ **Improving Coverage**
 - ❑ Improving availability same day or next day appointments
 - ❑ Improving Third Next Routine Appointment metrics
 - ❑ Large roster size and needing more coverage with provider hours on the evenings/weekends
- ❑ **Having an alternate provider**
 - ❑ Female patients may prefer to see a female provider (e.g. for breast exam, gynecological concerns, Periodic Health Review, pap smear or dermatology exam)
 - ❑ If the physician participates in deliveries at the hospital the PA can see many of the scheduled patients for the physician if they are called away urgently for a delivery.
- ❑ **Improved staff access to provider:** PAs can answer medical questions to administrative assistants, phone triage for patients, pharmacists, referrals, CCAC, specialists, clarify orders without the staff waiting for the physician to be available

More efficient workflow

- Example 1: if a PA is reviewing results (e.g. labs-urine test shows a UTI), they can write a prescription for the antibiotic, fax it to the pharmacy and call the patient with the results and plan. This will improve the workflow for the clinic and provide quicker patient care and follow-up.

Improved physician workload

- A PA is sharing responsibilities for the clinic work such as patient visits, lab and imaging review, review of consult notes, prescription refills, facilitating referrals, disability forms, WSIB forms, long term care forms, etc. They can discuss any urgent results with the physician and create a plan together.

Free up physician time to take on roles outside of clinic:

- Adding PA to the family practice also frees up time for physician to take on roles outside of the clinic including as a hospitalist, in nursing homes, extra shifts at the emergency while still providing PA indirect supervision / communication by phone. Physicians are also free to take on more roles in teaching and leadership.

Better service to their patients while improving the quality of life of the physician

- More patients seen, more hours of coverage with having an additional provider, with a decrease in workload.
- Decrease physician burnout
- Helping a physician to slowly transition into retirement by decreasing physician hours or workload
- Attracting another physician to the practice with the practice promoting a work life balance for the physician.

2. **How much time/coverage do I need for a PA?** After a needs assessment, determine how many hours of coverage you would like to have

- Part-time PA:** (e.g. 2-4 days per week) - full days or half days.
- Full-time PA :** full time hours - entirely focused and dedicated to your practice. This individual would be hired on as an employee of a solo physician or a group physician practice.

Step 3: Explore Funding Options for your Physician Assistant

1. Look into funding resources such as:

- ❑ **Roster Size Increase:** Increasing the practice's roster size (e.g. adding a PA, increasing roster size by 500-800 could support a full time PA salary with benefits).
- ❑ **FHT:** Funding through Family Health Teams (contact the FHT executive director in your family health team and inquire about funding through the allied health budget)
- ❑ **HFO:** Health Force Ontario Career Start Grants, this requires completion of an application opens in the summertime and a select number of partial grants are given for 50% of the PAs salary.
- ❑ **In Family FFS - Increase Volume of Patients Seen:** In a fee for service practice, according to the current OHIP guidelines, the physician must have a meaningful interaction with each patient in addition to the PA-patient interaction.
- ❑ **LHIN** could be possible (contact your LHIN directly to inquire about funding of a PA in your practice and creating a business model and quality improvement goals that can be measured to improve access and care to that region)
- ❑ **Consider Sharing Cost of the PA salary with several physicians in the team:** . If the PA saw same day appointments for 6 physicians and covered their patients while a physician is away on vacation, the 6 physicians could each pay 1/6 of the PA salary.

2. **Contact CAPA** admin@capa-acam.ca for further information and other resources and tools that may be not be listed here.

Step 4: Post a Job Posting

1. **Put together a job posting** and list the PA job for free through different job boards:
 - ❑ **CAPA website:** email admin@capa-acam.ca to request to post to the internal job board
 - ❑ **CAPA Facebook Page:** <https://www.facebook.com/CAPA.ACAM/>
 - ❑ **HFO Job listing:** pa@healthforceontario.ca email with request to post
 - ❑ **Contact PA Program Offices** - they often email their PA Alumni job listings
 - ❑ McMaster PA Program: paprogram@mcmaster.ca
 - ❑ PA Consortium (University of Toronto, NOSM, Michener):
physician.assistant@utoronto.ca
 - ❑ **Networking with PAs,** contact admin@capa-acam.ca to request posting to their job board, email list and online PA networking groups.
 - ❑ **Indeed.ca,** public online listing that PAs often frequent to view job listings within their area. Employers need to register an account and post their job posting.
2. **Invite PA candidates for an interview:** After reviewing submitted resume and cover letters, and selecting your top 3-5 (or more) candidates, invite them for interview. Ideally the interview would be with the supervising physicians and if applicable the executive director or office manager.

Step 5: Create a PA Contract, hire the PA

- ❑ **Create a PA Contract** - A contract should include:
 - ❑ **Duration of Employment:** Start & end date (if temporary)
 - ❑ **Type of Employment:** Full-time, permanent. Full-Time, contract. Part-time contract. Part-time permanent.
 - ❑ **Pay:** listed as salary or hourly rate. If a contract employee and no benefits, consider paying in lieu of benefits (between 4-20%)
 - ❑ **Schedule:** Days of the week, and hours to work per week (e.g. 40 hours), how overtime will be paid (or accrued as “banked” hours), call, evening shifts, on call
 - ❑ **Pay Scale:** a graded scale of wages or salaries paid within a particular organization or profession based on employee rank, status, experience or length of employment. Contact admin@capa-acam.ca for up-to-date salary ranges.
 - ❑ **List of Supervising Physicians:** List all physicians who will be working with the PA.
 - ❑ **List of Alternate Supervising Physicians:** List of other supervising physicians who will be working with the PA.
 - ❑ **List of Locations of Practice:** List all locations PA will be practicing.
 - ❑ **Continuing Medical Education** (CME/CPD) dollars, and Paid Education Days.
 - ❑ **Extended Health Care Benefits or a Percentage of Salary in Lieu of Benefits**
 - ❑ **Sick Days/Disability & Vacation Days**
 - ❑ **Malpractice Insurance:** Canadian Certified Physician Assistants who are members of CAPA have access to [professional liability insurance](#). Ensure you include this as a requirement on a job posting to ensure the PA and your practice are protected.
 - ❑ **Other:** Professional membership fees (e.g. CAPA membership)

❑ Other PA Employment Resources:

- ❑ **CMA** PA Employer Toolkit: <https://capa-acam.ca/pa-employers/pa-toolkit/>
- ❑ **CAPA** Physician Checklist: <https://capa-acam.ca/pa-employers/physician-check-list/>

Step 6: Orientation to the PA to practice

Ensuring smooth integration of the PA into the practice involves orientation to the staff, patients and clinic. Here we outline a few steps.

1. **Orient the PA to the clinic** (introduce PA to current staff, clinic resources)
 - a. **Introduce PA to clinic staff:** In a meeting or short introduction of PA to staff, having the supervising physician explain to staff what the PA's role will be in clinic. This is especially helpful if this is the first PA to work in your practice/clinic. This introduction may include:
 - i. PA job description in the clinic (what the PA can and cannot do independently, ie. with respect to narcotics)
 - ii. Questions or concerns you can bring to the PA
 - iii. PAs may write up a list of the type of patients to book with them to help the front desk staff with bookings.
2. **EMR Orientation** - PAs during their clinical clerkship have experience with multiple EMRs and dictation systems in private physician offices and hospitals. **Ask the PA if they require a half day of training on the EMR.**
3. **Consider having the PA shadow you for the first few clinics** to understand your style of practice, investigation preferences, medication preferences, etc.
4. **Medical Directives:** Having medical directives in place to allow the PA to see patients autonomously, order imaging and blood work, create referrals, and delegate prescribing medications and therapy and medical devices/equipment.
 - a. **Medical Directives allow PAs to perform the following:**
 - i. Performing Assessments
 - ii. Perform diagnostic and therapeutic procedures/interventions
 - iii. Ordering and interpreting investigations
 - iv. Formulating a Diagnosis and Management Plan
 - v. Prescribing Medications - Learn more [from the Ontario Pharmacy Association PA Update](#)
 - vi. Writing Orders
 - vii. Admitting & Discharging Patients (if the physician and PA have hospital privileges)

b. **Create PA Medical Directives:** The PA is able to help develop these directives, and through their CAPA membership they have access to medical directive templates to use for the practice.

c. **Links to Medical Directives Resources:**

- i. FHRCO - [Orders, Directives and Delegated Work](#)
- ii. Use the [MD Guide Template for Medical Directives](#)
- iii. Read CPSO's "[Practice Partner](#)" on [Creating Medical Directives](#)

5. **Inform patients about how they can book an appointment with the PA:** Have administrative assistants / medical secretaries explain to each patient that you have added a PA to the team to provide better patient care and more access. Provide the patient with the next available appointment with the MD or the PA.

6. **Consider a PA brochure or letter to your patients** posted in the waiting area to introduce the PA, the role of the PA. Contact admin@capa-acam.ca to request a some brochures and posters for the clinic.

7. **Establish PA/MD Feedback Sessions:** In the beginning, for the first few months establish weekly PA/MD meetings to discuss quality improvement, strategies for better workflow, and troubleshooting practice challenges

- Patient Review:** The MD does not need to review or interact with every single case in a roster settings: however these review sessions are helpful to review complex cases and answer any PA questions.
- Level of Supervision:** For a new PA graduate, the expectation would require a higher level of supervision. With more experience, supervision can be customized to the PA/MD relationship.
 - Example:* First two weeks of PA start, every case is reviewed. Once PA builds more competency and learns the physician style, review occurs on a scheduled basis for complex cases.
- Workflow Feedback:** PA may require multiple rooms to maximize efficiency of clinic: A PA may start with only 1 room and find this a limiting factor in the workflow with seeing patients. For an ideal efficient workflow the PA should have access to at least 2 clinic rooms.

