



Barriers & Facilitators of Physician Assistant Integration

Lessons from Family Medicine Settings in Ontario, Canada

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Overview

Introduced in 2007, the Physician Assistant profession in Ontario has continued to expand in Family Medicine settings. Despite this growth, very little research has focused on the factors impacting successful integration.

Research Objectives:
To identify the barriers & facilitators that contribute to successful PA integration in family practice settings in Ontario, Canada.

Methods & Study Design

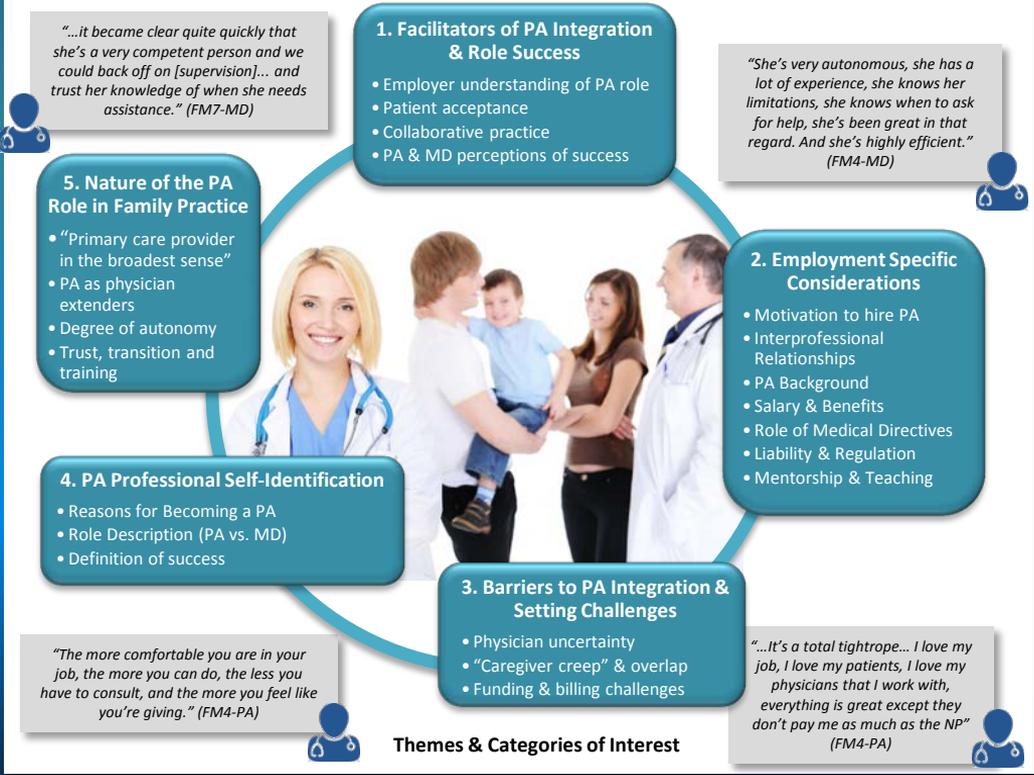
Methods: This study was conducted using a qualitative case study design, including interviews and document analysis (medical directives, job descriptions, contracts and other policies from each case site).

Setting: Community family medicine practices from urban and rural settings in Ontario, Canada.

Participants: Six family medicine practices participated in the case study. Family practices that had employed a PA for more than 2 years were eligible to participate. Interview participants included family physicians, PAs, and clinic managers.

- 7 Physician Assistants
- 6 Family Physicians
- 1 Family Medicine Administrator
- 1 Clinic Manager

Results



"...it became clear quite quickly that she's a very competent person and we could back off on [supervision]... and trust her knowledge of when she needs assistance." (FM7-MD)

"She's very autonomous, she has a lot of experience, she knows her limitations, she knows when to ask for help, she's been great in that regard. And she's highly efficient." (FM4-MD)

"The more comfortable you are in your job, the more you can do, the less you have to consult, and the more you feel like you're giving." (FM4-PA)

"...It's a total tightrope... I love my job, I love my patients, I love my physicians that I work with, everything is great except they don't pay me as much as the NP" (FM4-PA)

Future Directions

1. Development of Health Policy recommendations around PA integration and sustainability;
2. Case study expanded to include other settings:
 - Emergency Medicine
 - Internal Medicine
 - General Surgery
3. Development of Family Medicine specific employment guidelines (salary grid, liability, etc.)

Conclusions

Numerous elements, both barriers and facilitators, contribute to the success of the PA role. The results of this case study will have implications on health human resource planning in primary care settings and on policy development around Canadian PA regulation and funding.

Acknowledgements

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