



## 2016 Stakeholder Summit Summary

The importance of continuous quality improvement cannot be overstated, given our ever-evolving health care landscape. In order for PAs to continue providing the highest-quality health care to our patients, educators and practitioners must engage in an ongoing dialogue to ensure a strong alignment between educational expectations and clinical competencies.

In March 2016, the Physician Assistant Education Association (PAEA) hosted the **Stakeholder Summit**, bringing together 61 thought leaders, including PAs, PA educators, policy makers, and employers from across the country. The Summit's principal focus was to identify the key skills, knowledge, and experiences that new PA graduates need to be successful in clinical practice – and how PA education can adapt to better prepare students for the health care environment they will encounter.

In addition to PAEA, three other national PA organizations sponsored the Stakeholder Summit: the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA); the National Commission on Certification of Physician Assistants (NCCPA); and the American Academy of PAs (AAPA). This joint project of the “Four Orgs” – the PA organizations representing the entire PA lifecycle – serves as a model for how other health professions associations can collaborate to build a shared understanding of the important issues affecting their constituents.

The Summit yielded many crucial insights and constructive suggestions that will help PAEA in our efforts to ensure education is aligned with the practice environment. However, additional dialogue across the PA profession will be needed to explore these ideas in greater depth and identify next steps. For this reason, we're calling the Summit the first in a series of “fortunate events” through which we can address the future of PA education.

### Summit Objectives and Approach

Over the course of two days, the attendees examined a variety of issues, designed to achieve the following objectives:

1. Come to a consensus around key assumptions about health care and the medical education environment that will influence the future of PA education.
2. Identify a set of knowledge, skills, attitudes, and behaviors that PA students will need to successfully begin practicing medicine on day one of their employment.



3. Explore current exemplars and future ideas about the kinds of experiences students need to be effective when they enter practice.
4. Develop guiding principles to align PA education more closely with the emerging future of PA practice.

Attendees were asked to take a perspective of someone looking back from the future – a future where PA education and practice are tightly aligned and where new graduates are able to “hit the ground running” as they enter a variety of practice settings (e.g., primary care offices, hospitals, specialty clinics). From their vantage point in the “successful future,” we asked attendees to tell the story of how we got from the present to their imagined future, describing the challenges they were able to overcome along the way.

The stories that attendees told grappled with the most relevant issues of contemporary PA education: creating more opportunities for PA students to get practical, high quality clinical training; adapting the PA curriculum to include interpersonal and clinical reasoning skills; helping employers understand and experience the value that PA students can contribute to their practices; and developing PA programs that promote interprofessional education experiences.

## **Guiding Principles**

The insights gained from attendees at the Summit helped us develop a set of guiding principles that span the continuum of PA education – from the pre-acceptance process through the transition into practice. Many of the guiding principles are meant to reinforce the existing strengths of PA education, while others encourage both educators and employers to reconsider some of the current norms.

### **Pre-Acceptance**

1. Continue to strengthen the professional identity of PAs and the impact of the value they contribute to attract people into the PA profession. Embed the core values of the profession into PAs from the moment they are accepted into PA school.
2. Bolster the screening for interpersonal skills (e.g., leadership, collaboration, professional maturity, critical thinking), in addition to scientific and technical skills during the application process.

### **Academics**



1. Continue generalist PA education to ensure that future PAs can flexibly transition between multiple specialties - including primary care.
2. Once developed, use the Core Competencies for PA Graduates to guide curricular decisions, including the content and learning experiences which allow students to demonstrate competency.
3. Increase the number of educational and training opportunities for PAs to learn and work alongside the other health care professions comprising interprofessional health care teams.
4. Explore partnerships with other programs (e.g., business, public health) on the same campus to leverage resources that result in innovative programming.
5. Strengthen the integration of teaching interpersonal skills within the basic and clinical sciences.
6. Employ a continuous quality improvement process to ensure program content remains relevant to meet the changing needs and expectations of potential employers, from large health systems to smaller practices.
7. Provide opportunities to strengthen the clinical reasoning skills of PA students, including clinical studies interpretation, quality improvement, and outcomes research.

### **Clinical Experiences**

1. Build a closer connection between PA programs and their clinical partners to ensure student learning experiences meet the shared expectations of both the programs and the clinical sites.
2. Develop an expanded portfolio of clinical sites that can provide a variety of clinical settings, including office-based, health system, and community-based environments.
3. Provide professional development and training to clinical preceptors to ensure they are prepared to work with students.
4. Implement innovative approaches to expanding the number of clinical sites for PAs to meet the rapidly growing demand (e.g., national network of clinical sites).
5. Develop targeted national and local messaging to communicate the value that clinical sites and PA employers create for PA education in both primary and specialty care.

### **Transition to Practice**



1. Create a shared definition between educators and employers for what it means for new graduates to successfully enter practice.
2. Develop additional educational opportunities for new PA graduates and early career PAs, including structured activities while new graduates are preparing for their certification exams (e.g., rotations, mini-residency or fellowship programs, orientation, onboarding) to assist them as they transition into practice.
3. Encourage new PA graduates to embrace the importance of life-long learning and equip them with the skills to do so.

While these guiding principles are focused on education, PAEA will need to leverage our unique and powerful relationship with our Four Org partners to prioritize and implement these ideas. In particular, we'll need to work closely with ARC-PA to ensure that accreditation supports the educational innovations that PA programs need to adopt to keep pace with changes in practice, new models of teaching, and other opportunities that strengthen the profession's ability to educate future PAs.

Note: The views expressed in this summary are those of the Physician Assistant Education Association, and do not necessarily represent the conclusions of other Stakeholder Summit attendees or sponsors.