



PA Education
*Primary Care Workforce and
Training to Address Changing
Health Care Needs in
Rural Populations*

AUGUST 4, 2020

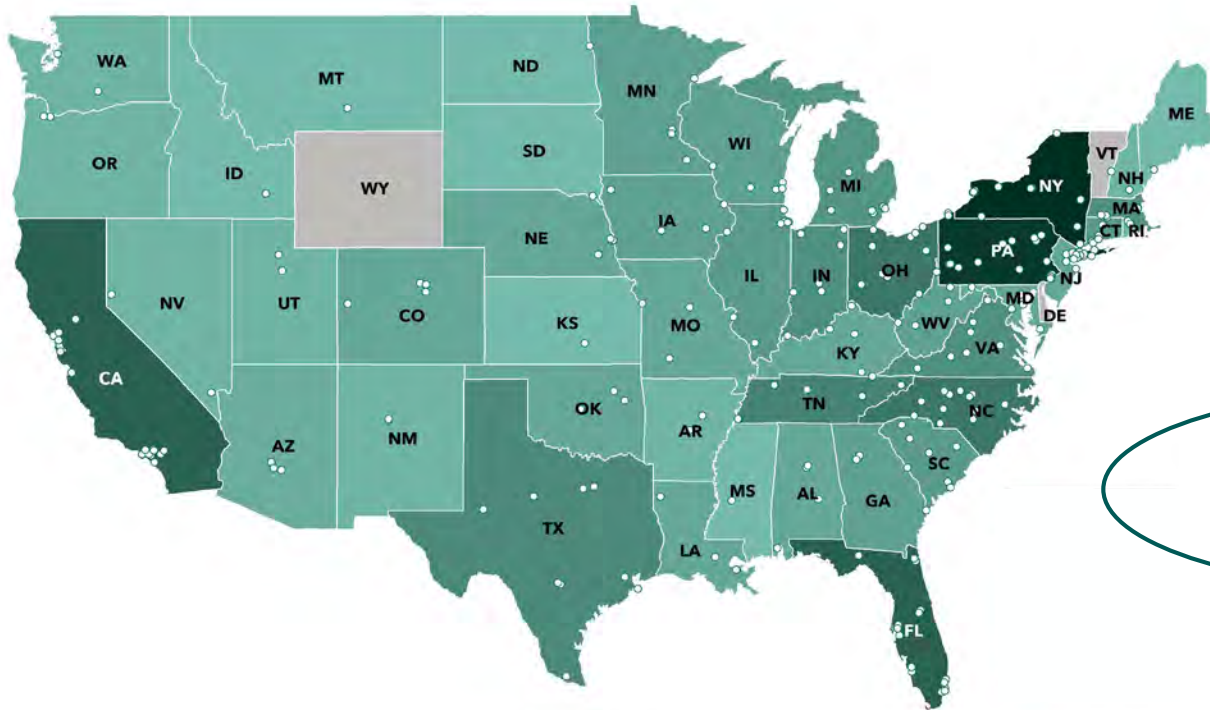
Howard Straker, EdD, MPH, PA-C
President

Physician Assistant Education Association

Today's Focus

- **The Basics of PA Education**
 - Students
- **Education Model**
 - Didactic and clinical
 - Oral health and substance use disorder content
 - Payment for clinical sites
 - Programs with a rural focus
- **Challenges and Recommendations**

Distribution of 260 PA Programs



Updated July 2020

TABLE 85. PROGRAM MISSION

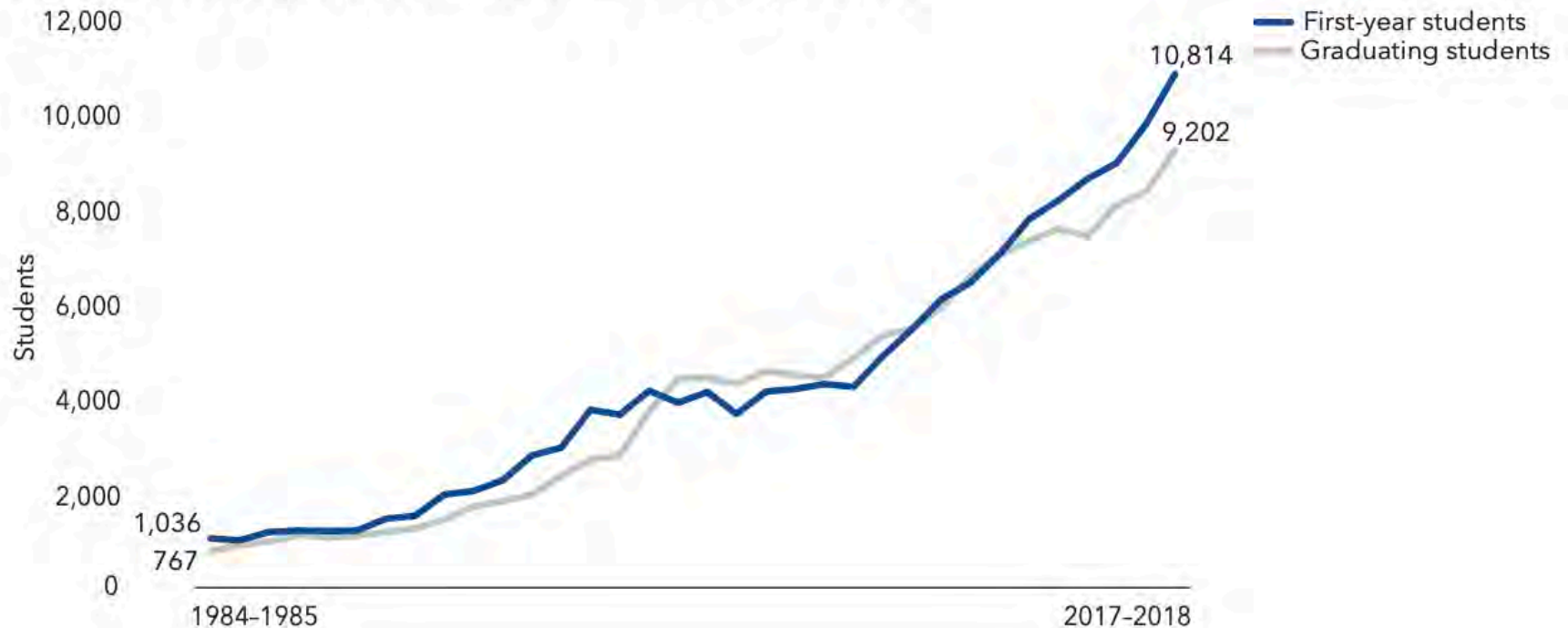
	<i>n</i>	%
Primary care	160	69.3
Underserved	98	42.4
Generalist	76	32.9
Rural	51	22.1
Specialist	2	0.9
Other	17	7.4
No overall focus	10	4.3
Total	231	-

Note: Percentages will sum to more than 100% because programs could select multiple focuses of their mission.

Source: PAEA data; *By the Numbers: Curriculum Report 4*: Data from the 2018 Prerequisite Curriculum Survey, Washington, DC: PAEA; 2019.

Applicants and Students

FIGURE 21. TOTAL PA FIRST-YEAR AND GRADUATING STUDENTS, 1985-2018



Source: Physician Assistant Education Association, *By the Numbers: Program Report 34*: Data from the 2018 Program Survey, Washington, DC: PAEA; 2019

PA Student Interest in Rural Health

Desired Practice Environment	MSS	EOPS
Inner city	3.2	3.0
Military base	2.8	2.5
Outside US	3.2	2.5
Rural	3.4	3.1
Suburban	4.0	3.8
Urban	3.8	3.7

1 = very undesirable, 5 = very desirable

Source: Physician Assistant Education Association, *By the Numbers: Student Report 4*: Data from the 2019 Matriculating Student and End of Program Surveys, Washington, DC: PAEA; 2020.

Length and Structure of Programs

Mean program length is **26.8 months**

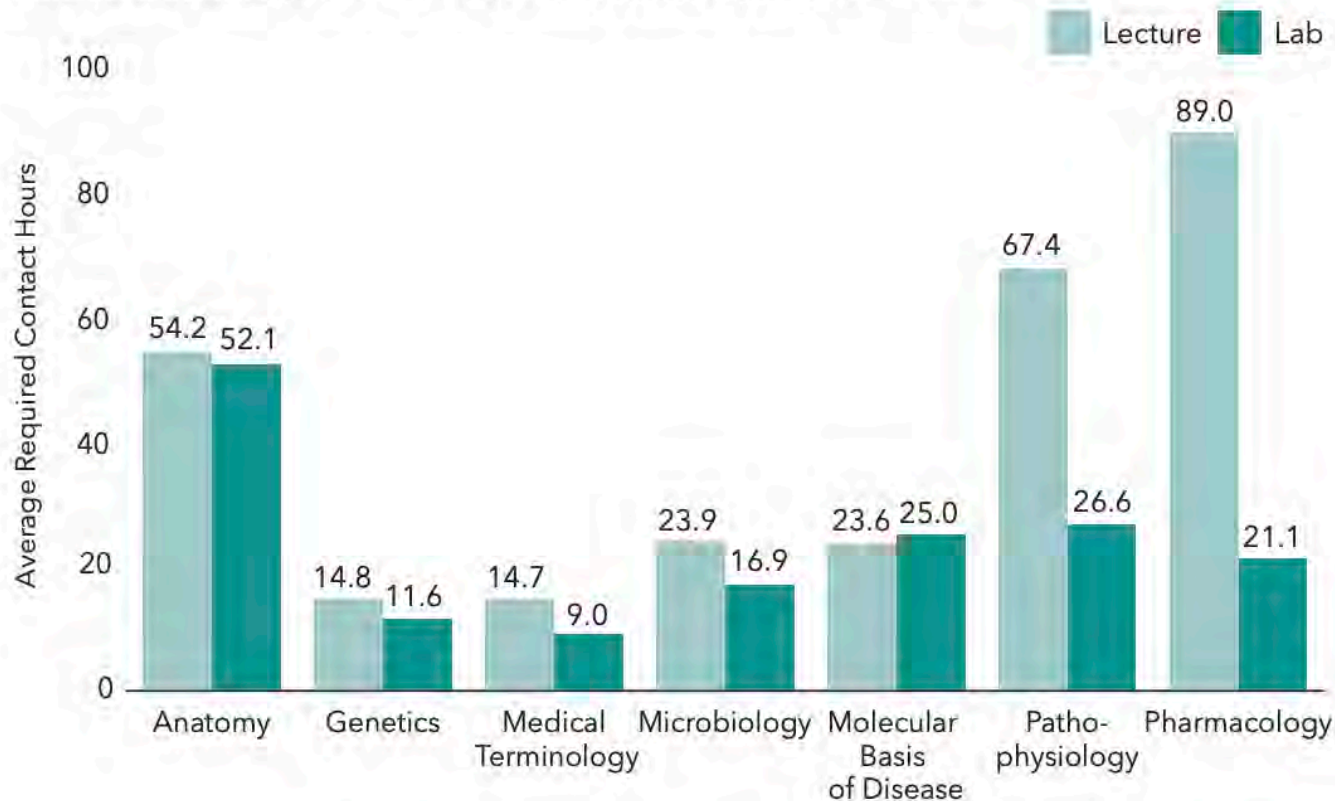
Didactic phase: mean of **58 weeks**

Clinical phase: mean of **54 weeks**

Source: PAEA Program Report 34. By the Numbers: Data from the 2018 Program Survey

Didactic Curriculum

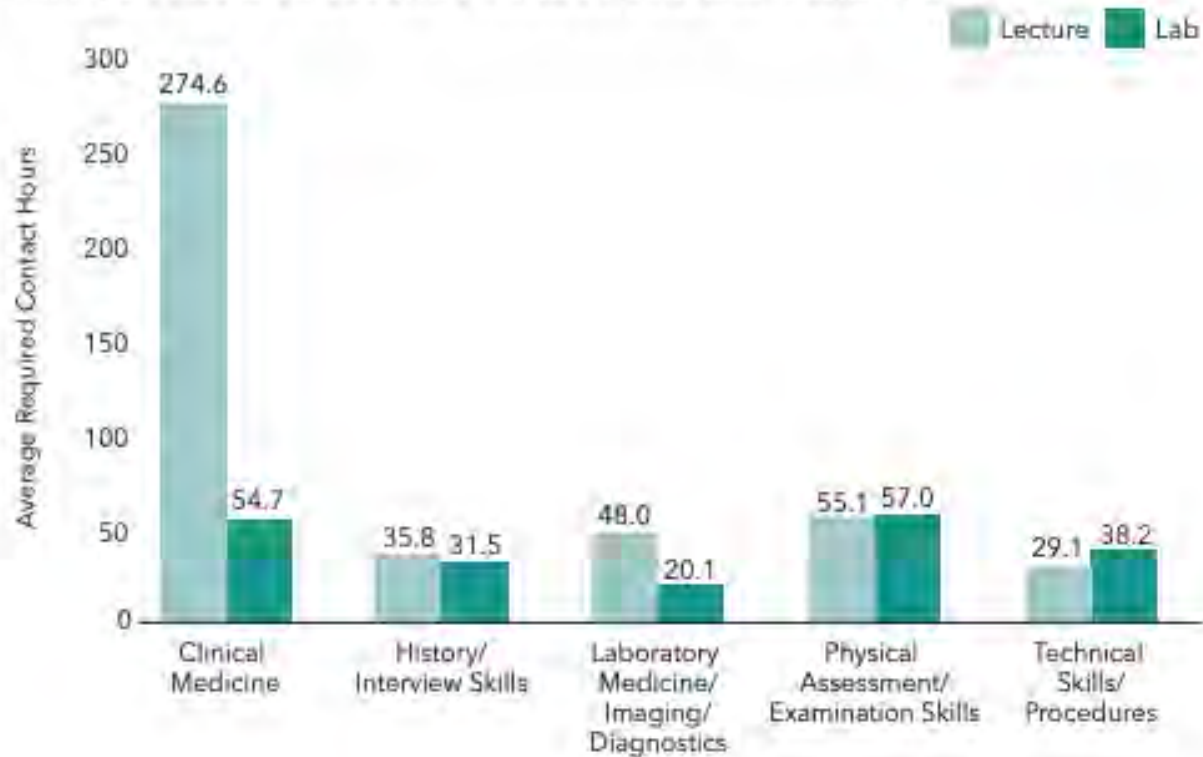
FIGURE 3. BASIC MEDICAL SCIENCES: REQUIRED CONTACT HOURS



Source: PAEA Curriculum Report 2. By the Numbers: Data from the 2016 Didactic Curriculum Survey

Didactic Curriculum

FIGURE 4. CLINICAL PREPARATORY SCIENCES: REQUIRED CONTACT HOURS



Source: PAEA Curriculum Report 2. By the Numbers: Data from the 2016 Didactic Curriculum Survey

Clinical Curriculum

REQUIRED ROTATIONS (SCPEs) AND SETTINGS

SUPERVISED CLINICAL PRACTICAL EXPERIENCES

- Family medicine
- Emergency medicine
- Internal medicine
- Surgery
- Pediatrics
- Women's health/Gynecology/Obstetrics
- Behavioral and mental health

SETTINGS

- Emergency Department
- Inpatient
- Outpatient
- Operating Room

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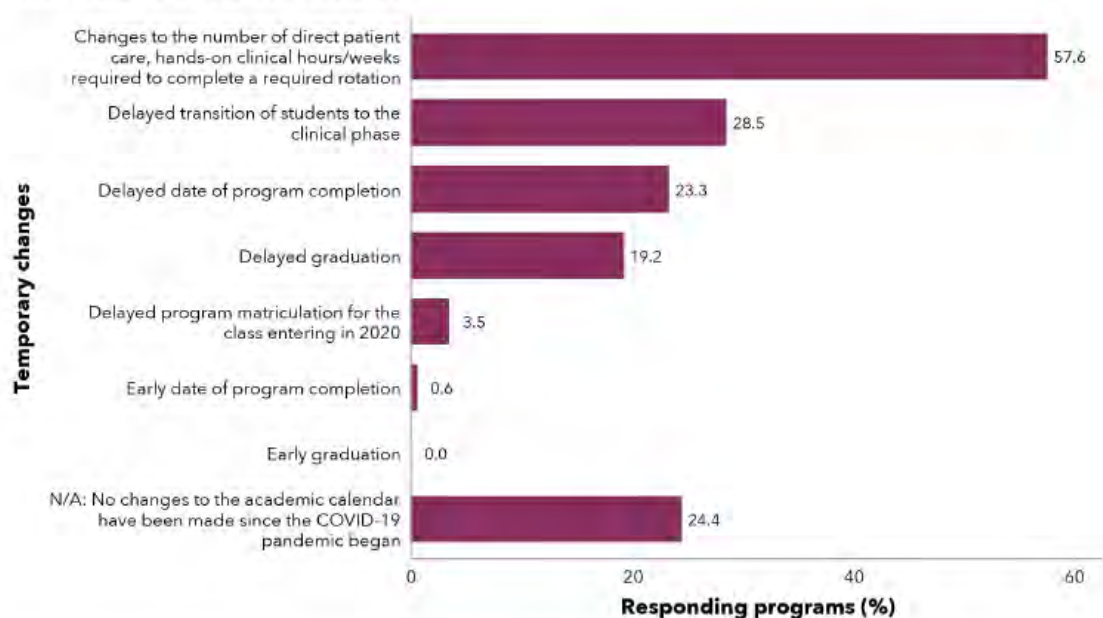
Source: ARC-PA Standards, 5th edition.

Impact of COVID-19 on PA Education

TEMPORARY CHANGES TO NORMAL OPERATIONS AND REQUIREMENTS IN RESPONSE TO COVID-19 PANDEMIC

Programs indicated what, if any, temporary operational changes had occurred as a result of the COVID-19 pandemic.

FIGURE 2. TEMPORARY CHANGES TO NORMAL PROGRAM OPERATIONS AND REQUIREMENTS IN RESPONSE TO COVID-19 PANDEMIC



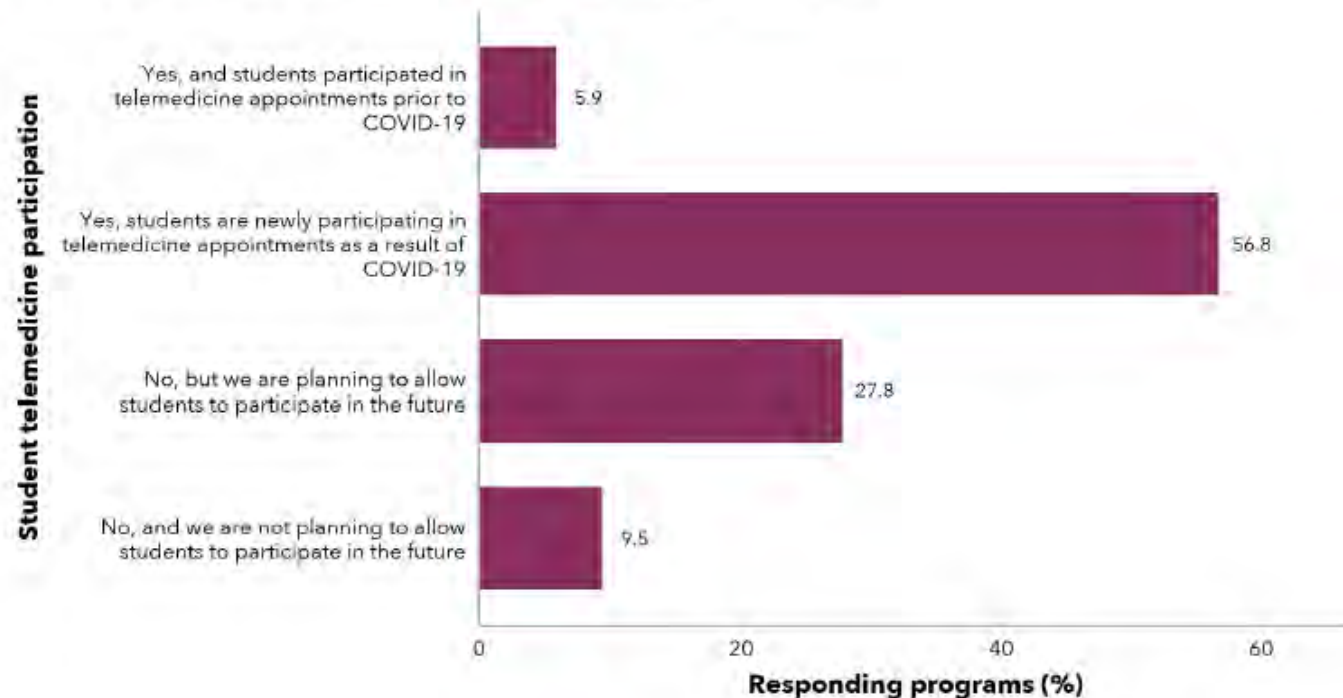
Note: n = 172. Percentages may sum to more than 100% because programs could select multiple changes.

Physician Assistant Education Association, COVID-19 Rapid Response Report 2. Washington, DC: PAEA; 2020.

Telemedicine —A Silver Lining in COVID Era

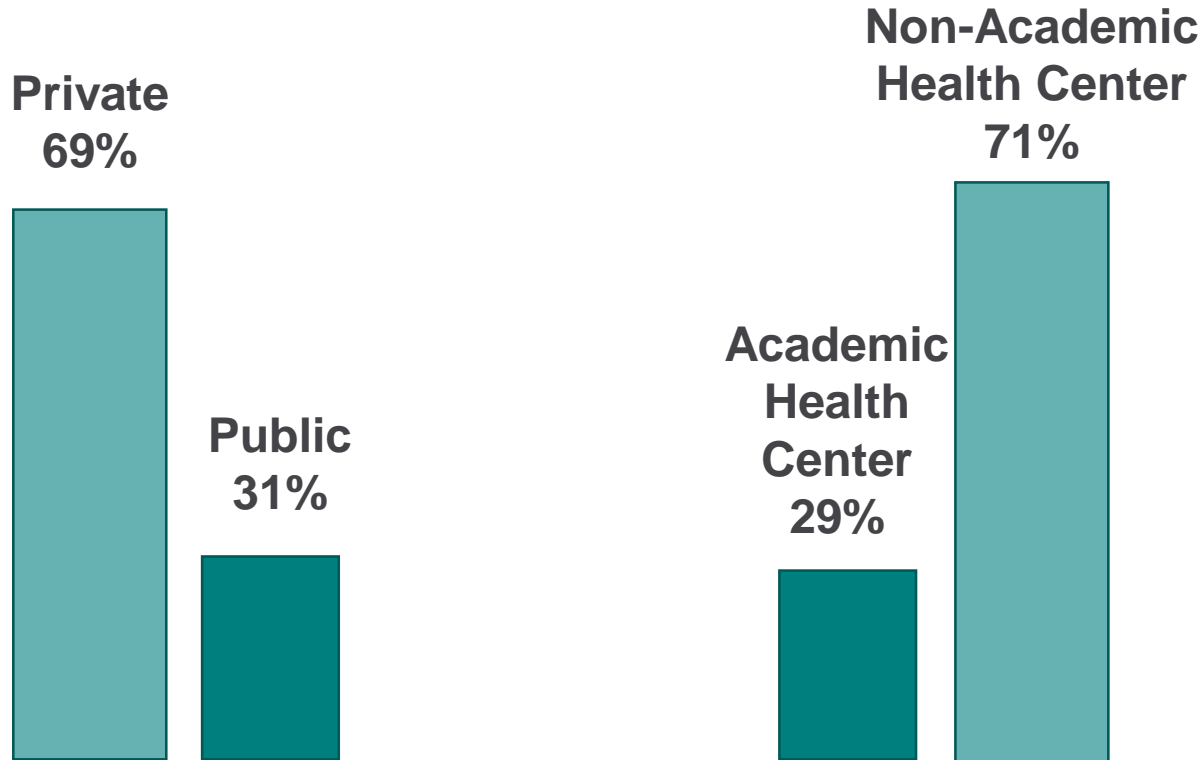
STUDENT PARTICIPATION IN TELEMEDICINE

FIGURE 27. CURRENT STUDENT PARTICIPATION IN TELEMEDICINE



Physician Assistant Education Association, COVID-19 Rapid Response Report 2. Washington, DC: PAEA; 2020.

Program Sponsoring Institutions



Source: PAEA Program Report 34. By the Numbers: Data from the 2018 Program Survey

Oral Health and Substance Use Disorder Content



- PA students receive **7 hours of oral health training**.
- **96 percent of programs** have integrated some oral health education.

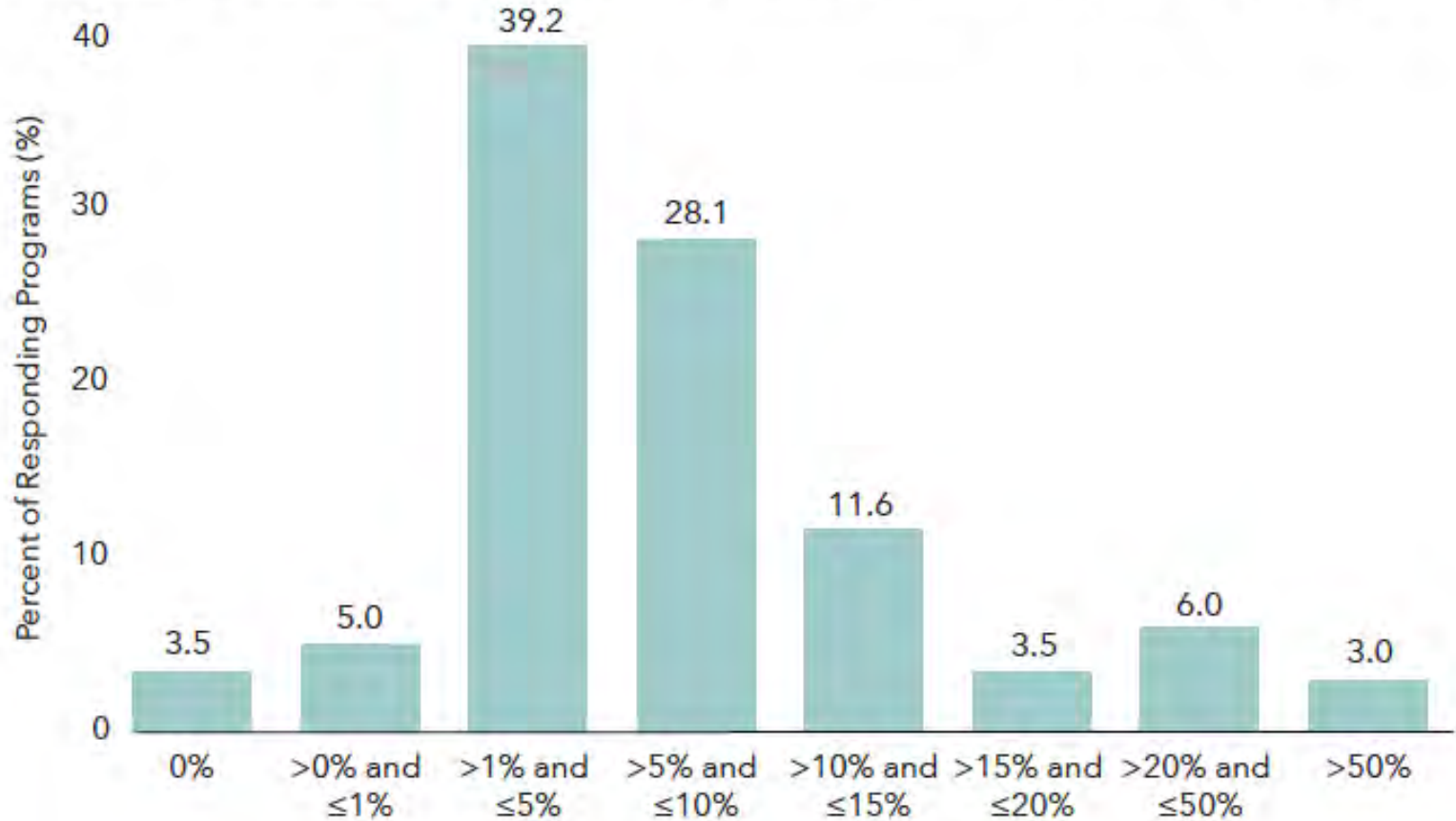


- The percentage of PA programs offering DEA X-waiver training has increased from **3% to 70%** since 2018.

Sources: Oral health, PAEA Curriculum Report 3. By the Numbers: Data from the 2017 Clinical Curriculum Survey. X-waiver training, Integrating Oral Health: Physician Assistant Education in 2017. J Physician Assist Educ, 30(2):93-100.

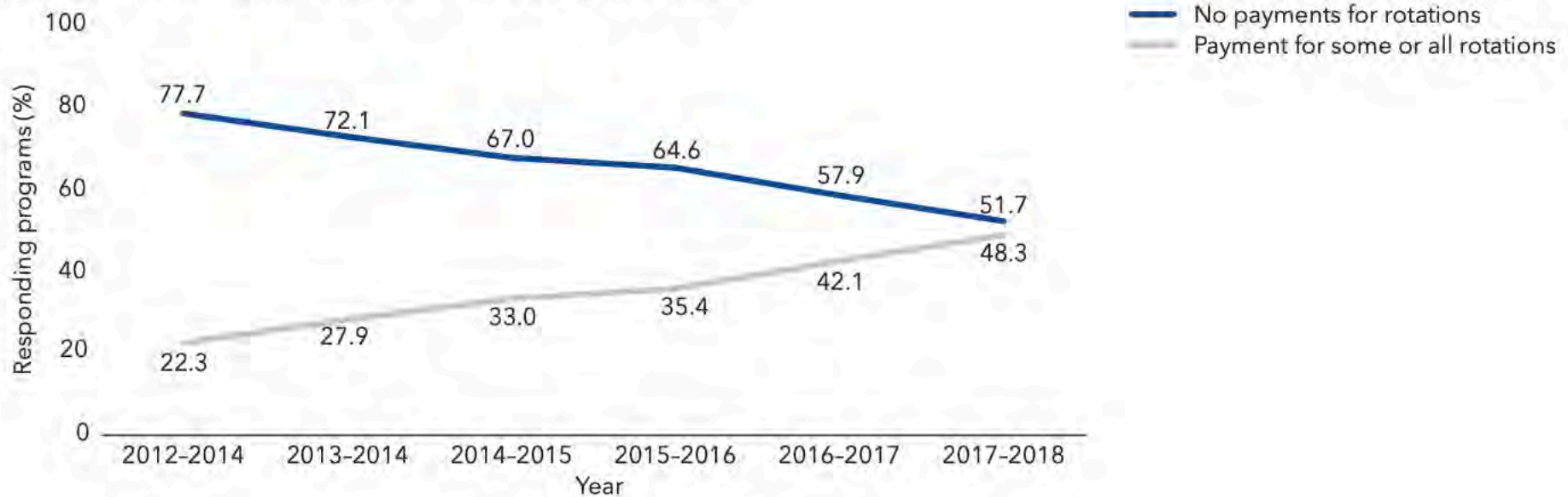
Interprofessional Education

FIGURE 8. DISTRIBUTION OF PERCENTAGE OF DIDACTIC CURRICULUM DEVOTED TO IPE



Payment for Clinical Sites

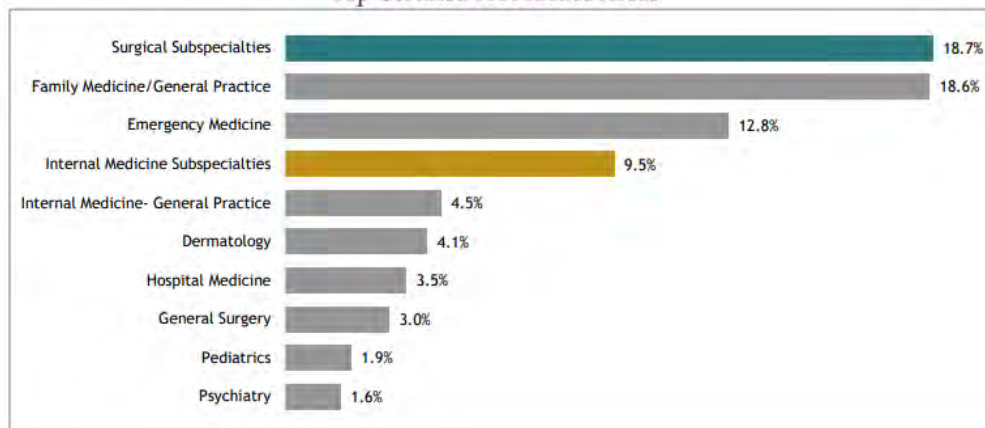
FIGURE 7. TRENDS IN PAYMENT FOR CLINICAL SITES, 2012-2018



Source: PAEA Curriculum Report 3. By the Numbers: Data from the 2017 Clinical Curriculum Survey

Additional Data on PA Practice

Top Certified PA Practice Areas



Specialty	Number	Percent
Family Medicine	19,453	18.6
Gynecology	356	0.3
General Internal Medicine	4,690	4.5
Obstetrics and Gynecology	1,193	1.1
Pediatrics- General	1,979	1.9
Setting		
CHC	3,119	3.0
Rural HC	1,906	1.8
Public (non-FQHC)	951	0.9
School/College-based	864	0.8
Retail Clinic	249	0.2
Urgent Care	4,834	4.6

PAEA Recommendations

- Interprofessional challenges require interprofessional solutions
 - Workforce development investments must:
 - Address cross-disciplinary decline in primary care practice
 - Combat cross-disciplinary disincentives to practice in rural/underserved areas
 - Reflect the value of team-based care
 - Support expanded Telemedicine capacity
 - Ensure that all HRSA-administered programs designed to promote access to care in rural areas support interprofessional training to the extent allowable by statute
 - PCTE Collaborative Grants = Model for Future Competitions
 - Transparency is key