Item: 18



REPORT CLASSIFICATION	✓	CATEGORY OF PAPER	✓
Official	✓	Proposes specific action	
Official: Sensitive Commercial		Provides assurance	✓
Official: Sensitive Personal		For information only	

BOARD 30 SEPTEMBER 2025					
Report Title:	Response to the Independent Review of the Physician Associate and Anaesthesia Associate Roles				

Purpose of report

To provide the Board with information on the requirements placed upon employers emerging from the review by Professor Gillian Leng of Physician Associate (PA) and Anaesthesia Associate (AA) roles. In addition, provide an overview of the action underway as a system to respond to review recommendations and ensure compliance.

Key points

Following high profile debate amongst professionals and the public regarding Physician Associates (PA) and Anaesthesia Associates (AA) with some concerns for safety raised, an independent review of the two professions was commissioned in the Autumn of 2024 (the Leng Review). The principal aim of the review was to determine whether the roles of PA and AA were safe and effective as members of a multidisciplinary team.

The review:

- recognises and highlights the contributions of physician associates (PAs) and anaesthesia associates (AAs) in the healthcare system
- calls for clearer regulatory frameworks and governance structures for PAs and AAs. This includes
 defining their scope of practice and ensuring that they are integrated into the healthcare team
 effectively
- identifies the need for clear career progression for PAs and AAs
- calls for some limitation to practice particularly in relation to PAs and undifferentiated diagnosis
- recommends further consideration to be given to the need for long term workforce planning for AAs.

There are in the region of 99 PA and 12 AAs employed by general practice and NHS Foundation Trusts in the North East and North Cumbria.

NHS England has informed employers that with immediate effect job titles should be change to assistant rather than associate; all new entrants to primary care have at least two years' experience in secondary care; and ensure PAs do not triage patients nor see undifferentiated patients. In addition, duties and job descriptions should be aligned to the national template and importantly that there is support for these staff groups throughout this transition, including both pastoral and professional support.

Risks and issues

• With immediate effect there are changes to the way in which clinical services are able to deploy Physicians Associates

- The ICB may wish to seek assurance that independent sector providers are aware of the review outcomes and are taking appropriate action.
- The need to support staff wellbeing throughout this transition was highlighted in the review

Assurances and supporting documentation

- NHS England has communicated the outcomes of the review (Publication reference: PRN02074) to NHS trusts and integrated care boards medical directors or chief medical officers; chief people officers; and Primary care networks. This also includes making NHS trust and integrated care board chief executives, regional medical directors and regional primary care medical directors aware.
- It is not clear if or how contracted providers from the independent sector have been made aware; however, it is likely medical directors, and Chief Executives will have been following the debate and review nationally.
- In addition to support from line managers and employers, the North East and North Cumbria Mental Health and Wellbeing Hub is available to PAs and AAs. Furthermore, there is an NHS England text support service for all NHS staff.

Recommendation/action required

The Board is asked to:

- 1. Note the key findings and recommendations from the Independent Review of the Physician Associate and Anaesthesia Associate Roles.
- 2. Note the number of PAs and AAs employed across the North East and North Cumbria system.
- 3. Be assured through NHS England correspondence that all NHS employers understand the action to be taken to ensure safety and support the transition and ongoing development of the Physician's Assistant and Anaesthesia Assistant roles.
- 4. Seek assurance via ICB contracting mechanisms that independent sector employers are aware of the review recommendations and are responding as required.

Acronyms and abbreviations explained							
Physician Associate (PA) Anaesthesia Associate (AA)							
Sponsor/Approving Executive Director	Kelly A	Kelly Angus, Chief People Officer					
Date approved by Executive Director	15 September 2025						
Report author	Julie Bailey People Strategy & Workforce Manager						
Link to ICP strategy prior	rities						
Longer and Healthier Lives							
Fairer Outcomes for All							
Better Health and Care Services					✓		
Giving Children and Young People the Best Start in Life							
Relevant legal/statutory issues							
Note any relevant Acts, regulations, national guidelines etc							
Any potential/actual conflicts of interest associated with the pape		Yes		No	✓	N/A	

Equality analysis completed	Yes	No		N/A	✓	
If there is an expected impact on patient outcomes and/or experience, has a quality impact assessment been undertaken?	Yes	No		N/A	✓	
Essential considerations	Essential considerations					
Financial implications and considerations	No financial implications identified for the ICB					
Contracting and Procurement	Procurement colleagues have confirmed they can write to independent sector commissioned providers regarding the review and raise in contract meetings.					
Local Delivery Team	Not required					
Digital implications	Not applicable					
Clinical involvement	Clinicians have been involved nationally in the Leng Review.					
Health inequalities	Not appliable					
Patient and public involvement	Patients and families have been involved nationally in the Leng Review.					
Partner and/or other stakeholder engagement	A range of stakeholder organisations have been involved nationally in the Leng Review.					
Other resources	Not applicable					