

Physician Associate Apprenticeship Frequently Asked Questions

General Questions

What are apprenticeships?

Apprenticeships are work-based training programmes which are designed to help employers train people for specific job roles. At the same time, apprentices get a paying job with valuable training while they work towards a nationally recognised apprenticeship standard or framework.

Who can do an apprenticeship?

Anyone in England aged 16 years old and above, whether employed, unemployed or leaving school, can do an apprenticeship. There is no upper age limit however where there is a statutory or professional body requirement for people in a particular role to be aged 18 or over, a minimum age limit would apply.

What is 20% off the job?

Apprentices must spend a minimum of 20% of their time engaged in off-the-job learning. The off-the-job learning must take place within the apprentices normal contracted hours.

Who pays for the apprentice's salary?

Employers pay the salary of the apprentices, and the government pays for the training and assessment. The amount of government funding varies depending on whether the employer is a levy payer or non-levy payer. Details can be seen [here](#)

The Physician Associate Apprenticeship Standard

What level is the Physician Associate apprenticeship?

The Physician Associate Apprenticeship is a Level 7 apprenticeship. Full details of the apprenticeship standard are available using [this link](#).

Who will decide what exactly needs to be covered during the apprenticeship?

The apprenticeship standard sets out what should be covered during the apprenticeship. The Physician Associate apprenticeship standard is available using [this link](#). Apprentices undertake the same mandatory qualification as the non-apprenticeship Physician Associate students and achieve the same occupational competence and outcome. They undertake the same modules and module assessments.

What are the plans to update the standard to reflect the changes that will come with statutory regulation?

Work will be undertaken to align the outcomes, values and behaviours to the revised Physician Associate curriculum and GMC generic outcomes (this is being consulted on now and the framework is anticipated to be finalised by Summer 2022).

Who will be responsible for taking this forwards when the time comes?

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This work will be led by the Institute for Apprenticeships and Technical Education (Department for Education), the Employer led trailblazer group facilitated by HEE and Skills for Health.

What is the anticipated length of the apprenticeship?

The typical duration to gateway (the on programme 'practical period' of the apprenticeship not including EPA) has been set at 30 months plus EPA time (up to 3 months). This duration is based on an apprentice working at least 30 hours per week. Full details of the apprenticeship standard are available using [this link](#).

Is the training period expected to be the same as 90 weeks, i.e., 45 weeks per year as the current route?

The apprenticeship standard should be delivered over the full duration of the programme length. HEIs will need to design a delivery model for the apprenticeship standard that works both for themselves and for employers, but it may differ from what is already being delivered to direct entry students.

How can the apprenticeship be done in 30 months when there is only 20% of time allocated to off-the job training?

20% off the job training is a minimum requirement specified by the ESFA; HEIs can set this higher as required.

Does this mean that HEIs would have to run two separate programmes?

It is up to the HEI to decide this. Some HEIs choose to run two separate programmes, and some choose to combine the direct entry and apprenticeship programmes. However, if a HEI combines the apprenticeship with the direct entry programme, they must ensure that the apprenticeship is delivered in line with the funding rules and meets all Ofsted and ESFA requirements. It is important that apprentices are recognised as employees and process are in place to support the tri-partite nature of apprenticeships regarding employer involvement.

How can parity of the apprenticeship route with the traditional Masters route be secured and avoid apprentices being used as cheap labour?

Apprentices undertake the same mandatory qualification as the non-apprenticeship Physician Associates and achieve the same occupational competence and outcome. They undertake the same modules and module assessments.

If anything, the apprenticeship can offer more than the non-apprenticeship route as it can open up alternative employment avenues for employers and provide an alternative route of qualification for employees, therefore widening access to a profession. Apprentices are not cheap labour; they are a significant investment for both the employer and the apprentice. The value of apprenticeships for an employer is that you are investing in your own workforce and, hopefully, creating a long-term workforce.

Is it mandatory for Higher Education Institutions (HEIs) / Universities to offer the apprenticeship?

No, the decision as to whether to offer the apprenticeship route sits with the HEI. Not all HEIs offer apprenticeships.

How can there be flexibility in the start date of the apprenticeship?

HEIs can choose to start their programmes on any date they wish. This should be designed with employers based on their need and does not necessarily need to be the same start dates as direct entry programmes.

Entry Requirements

HEIs will need to specify the entry criteria to the Physician Associate apprenticeship; it is important that this is done in conjunction with employers and for an apprenticeship route, should allow for widening participation; experience can be taken into account along with qualifications. The apprenticeship standard suggests that typically, entry requirements are a bioscience-related first degree or a Nursing and Midwifery Council Registered Nurse or Midwife, or a Health and Care Professions Council Registered Allied Healthcare Professional.

What's different about the apprenticeship to the traditional route?

The apprenticeship has parity with traditional route and includes the same mandatory qualification and the same occupational competence and outcome. The main difference to the traditional route is that apprentices are employed and the cost of the apprenticeship standard training and assessment is paid for by the apprenticeship levy (see below for apprenticeship funding).

What is the difference between the Physician Associate role and the Advanced Clinical Practitioner?

Advanced Clinical Practitioner's work across the 4 Advanced Practice pillars: clinical, education, research and leadership so are a different occupation with a different remit to a Physician Associate.

Apprenticeship Funding

How can employers access apprenticeship funding?

All employers with a pay bill of over £3 million each year pay the apprenticeship levy and the levy can only be spent on apprenticeship training. An organisation's apprenticeship lead, who normally works within the training or HR departments, will be able to help employers access the apprenticeship levy and start apprentices on programmes. Primary Care employers can access support from their Primary Care Training HUB.

If an employing organisation doesn't pay the apprenticeship levy, how can they access apprenticeship levy funding?

If an organisation does not pay the apprenticeship levy it can still access government funding for apprenticeships. It can either:

1. Reserve government co-investment: organisations can reserve funding, where the government pays 95% of the training costs and the employer pays the remaining 5%.
2. Levy Transfers: levy paying employers can transfer some of their annual levy to other employers. These transfers cover 100% of the training costs of the apprenticeship.

Is the levy different between primary and secondary care?

Primary Care employers are usually 'non-levy' payers, as they are not large enough to have a levy pot. They can either pay a 5% contribution to the costs, where the government pay the other 95%, or they can receive a levy transfer from a larger levy – paying organisation (although this can't be guaranteed). HEE can facilitate this process.

Is the levy funding guaranteed once employers employ an apprentice or do they need to ensure they have received confirmation before they employ an apprentice?

Levy paying organisations are able to use their levy pot to pay for the apprenticeship. If you are a levy paying organisation you will need to contact your apprentice lead to discuss your intention

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to support Physician Associate apprentices and to arrange for any internal approvals processes to access the funding to be followed.

If your organisation is a non-levy paying organisation, then you will need to either arrange for a levy transfer or a reservation of funds co-investment for each apprentice you intend to support. These must be arranged and in place before the apprentice begins their apprenticeship. Each region has a support network available to help non-levy paying organisation to apply for levy transfers or reservation of funds. Please contact your regional relationship manager who will be able to help you.

Apprenticeship Levy

The apprenticeship levy can only be used to pay for the cost of the apprenticeship training and assessment up to the maximum funding band amount; apprentice wages or any other costs such as travel, and accommodation expenses or other training not included in the apprenticeship cannot be paid for using the apprenticeship levy.

The apprenticeship levy is not paid to the apprentice or to the employing organisations budget; levy payments are made to the University / apprenticeship provider in equal monthly instalments over the duration of the apprenticeship via a digital account.

Can employers use apprenticeship levy funding to pay for their apprentice's salary?

Apprenticeship levy, reservations of funds and levy transfers do not cover salary costs so the employing organisation will need to fund the apprentice's salary.

How is the funding band of an apprenticeship decided and assigned?

Each apprenticeship is allocated to one of 30 funding bands. Details of this process are available using [this link](#). The funding band assigned to the Physician Associate apprenticeship is different to the cost of the direct entry route. The fees charged for the direct entry route cannot be charged for the apprenticeship and the apprenticeship levy cannot be used to pay for fees for a student on the direct entry route.

Apprenticeship Standard Cost

The maximum funding available for the Physician Associate apprenticeship is £17,000. This means that the maximum amount of funding that can be used from the apprenticeship levy to pay for the cost of the apprenticeship standard training and assessment is £17,000 over the duration of the apprenticeship. This includes the End Point Assessment cost.

Apprenticeship training providers must deliver everything required by the apprenticeship standard for the maximum funding available including any mandatory qualifications. Apprenticeship training providers are only able to charge additional costs for elements that are not covered by the apprenticeship standard, and these would be optional for employers.

Where placements are required by the apprenticeship standard, the organisation of these should be covered by the levy cost, but employers will need to provide the placements and some support for apprentices on placement.

How much levy funding can employers access?

The amount of levy funding that can be used to pay for the apprenticeship standard and assessment is the maximum funding band amount of £17,000. If an employer negotiates a price with an apprenticeship provider that is in excess of funding band maximum, the employer must pay the amount over the maximum funding band amount of £17,000.

If someone is on an apprenticeship, can they also access other student loans?

The apprenticeship levy covers the full training and assessment cost of the programme. Apprentices cannot use a student loan to pay for their apprenticeship.

If the maximum funding band amount that can be used by the levy to pay for apprenticeship route is £17,000, why do HEIs charge different rates for the traditional route.

An apprenticeship is different to a direct entry programme. What a HEI charges for its direct entry programme is the decision of the HEI. Direct entry programmes cannot be paid for by the apprenticeship levy.

Is it anticipated that the fee structure for HEI programmes will be reduced compared to direct entry in order for all costs to be covered by the £17000 levy?

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Additional Funding

Currently HEE supports self-funding Physician Associate students undertaking a Physician Associate programme (both MSc and PGDip) by providing £5000 per student, per programme to support their studies. The student support allowance is paid at £2500 per student, per year of their course. This is funded by HEE but paid to the student via the university. MSc students are also able to apply for a master's loan via student loans to pay for their programme. Physician Associate Apprentices will not be able to access the £2500 per year funding.

A preceptorship payment from HEE is also provided to primary care employers for employing a newly qualified Physician Associate. Preceptorship funding will be available in 22/23.

Is there likely to be any HEE funding support for employers who employ Physician Associate Apprentices?

There is currently no additional funding support for employers who employ Physician Associate Apprentices, however, this is currently being explored via the Spending Review.

ARRS

The Physician Associate role is part of the Additional Roles Reimbursement Scheme. This is currently for qualified Physician Associates only and not for Physician Associate Apprentices; however, this is currently being explored to support inclusion.

Will HEE still cover placement costs for those on apprenticeship route?

Currently apprenticeship placements do not attract placement tariff so placements are not funded by HEE. Placements on apprenticeships should not be paid for by the HEI or employers. Instead, it is recommended that employers work together within their systems, supported by the HEI, to offer reciprocal placement arrangements to support all apprentices. This will be included in the tender specification and will be an expectation of all employers when the apprenticeship is implemented.

Will there be funding from HEE tariff for supervision requirements, as there is for medics?

Currently apprenticeships do not attract placement tariff.

How will an apprentice funded by secondary care complete the primary care component of PA training?

Physician Associate apprentices will be required to complete placements in other sectors/specialties to meet curriculum requirements. Apprenticeships are not covered by placement tariff, so HEE will not be able to fund placements

Physician Associate Apprenticeship - Recruitment

Can employers recruit part time apprentices?

The ESFA are clear that part-time working should not be a barrier to someone undertaking an apprenticeship, therefore the apprenticeship can be undertaken on a part time basis if this is offered by the employer. If an apprentice works less than full time, the apprenticeship duration will be extended accordingly. It is important that you find out which apprenticeship providers offer part-time apprenticeship options for the Physician Associate apprenticeship.

Are there any restrictions on hourly contracts?

It is employer choice as to how the apprentice is recruited. They must be employed and be given a suitable contract which gives them enough time to complete the apprenticeship including end point assessment. The typical duration of the apprenticeship is 30 months which is based on an apprentice working 30 hours or more per week. If you wanted to recruit an apprentice for less than 30 hours per week, you will need to check which apprenticeship providers are able to provide an apprenticeship model which supports their hours of work.

Physician Associate Apprentice Pay

The Physician Associate role is an Agenda for Change role, and all qualified (including newly qualified) Physician Associates should be paid at a band 7.

Physician Associate apprentices must be employed and paid a wage. The wage paid to Physician Associate apprentices is the decision of the employer, however, apprentices must be paid at least minimum wage as specified in the apprenticeship funding rules.

Physician Associate Case Studies

The following links provide a range of case studies which demonstrate the use of Physician Associates:

- [Physician associates and GPs in primary care: a comparison](#)
- <https://www.healthcareers.nhs.uk/explore-roles/medical-associate-professions/roles-medical-associate-professions/physician-associate>
- <https://www.fparcp.co.uk/employers/pas-in-general-practice>

How much time do you expect the apprentice to have to work in their employing organisation?

Apprenticeships consist of 'off the job training', where apprentices will learn the knowledge, skills and behaviours specified in the apprenticeship standard and undertake any mandatory qualifications, as well as 'on the job' training where apprentices will be given the opportunity to embed and consolidate the knowledge, skills and behaviours they have learned. This apprenticeship also requires the apprentice to work in a range of settings over the duration of the apprenticeship on placement in primary and secondary care, acute medicine and surgical.

How will apprentices be selected for the apprenticeship?

Employers will need to identify / select those individuals that they would like to support to undertake the apprenticeship; those individuals will then need to apply to the HEI and the HEI will need to undertake the necessary checks including apprenticeship eligibility checks before they

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are offered a place on the programme. Many HEIs will support a joint recruitment and application process to the apprenticeship with employers.

Are there currently any apprentices undertaking Physician Associate apprenticeship.

No, an apprenticeship cannot be delivered until an End Point Assessment Organisation is identified in principle. This occurred in late summer 2021. HEIs will now have to develop the apprenticeship programme which will take a little time.

Do employers need to wait until the procurement process is complete before starting an apprentice on a Physician Associate Apprenticeship.

You will be unable to recruit to the apprenticeship until a HEI offers a Physician Associate Apprenticeship. Currently HEIs who intend to offer the Physician Associate Apprenticeship are preparing to develop the apprenticeship programme. The apprentice will not be applying for the traditional route, they must apply for the apprenticeship for it to be funded via the apprenticeship levy. You could choose to employ them as a member of staff undertaking a different role and then put them on the apprenticeship when the apprenticeship becomes available, however you won't know whether they will be eligible and therefore able to secure a place on an apprenticeship programme until the HEIs open their application process.

You will have to have a service contract with the provider, and for NHS organisations this should only be on NHS Standard Terms. All of this will have been done for you if you order through the national procurement.

Are apprentices expected to work in the organisation during their training in addition to placements?

Apprentices are employees and would work whilst undertaking their apprenticeship. There will be a certain amount of 'off the job training' that the apprentice will have to undertake, including protected study time and placements. Outside of this time, apprentices will be in their employed role and will undertake 'on-the-job learning'. The job role the apprentice is employed in should provide the opportunity for them to gain the knowledge, skills and behaviours needed to achieve their apprenticeship. Employers should also allow the apprentice time to complete their programme of study and allow them access to opportunities to enable them to develop through their job role.

Do apprentices have to work for the employing organisation who have supported them once they complete their apprenticeship?

There is no legal obligation for either party at the end of the apprenticeship. The employer does not have to have a qualified role for the apprentice to move into, and the apprentice does not have to stay once they have finished.

What happens if the apprentice leaves the employer before completion of the apprenticeship?

If they move to a different employer in a suitable role that allows them to complete the apprenticeship and the new employer is happy to support them to complete, then the apprentice can continue with their apprenticeship. If the apprentice does not wish to complete their programme or if the new employer is unable to support them then the apprentice will stop their apprenticeship and any levy payments to the apprenticeship provider will stop.

Does the apprenticeship support better those already working in the NHS rather than those coming in new to healthcare?

Apprenticeships can be used to support both internal staff within the NHS and external recruits. Typically, most apprenticeships in the NHS are used to develop existing staff, but it will depend on available candidates and employer choice

What is the benefit of having an apprentice over employing a self – funding graduate?

Apprenticeships give you the opportunity to invest in your workforce and help shape the apprentice as they train. It also gives potential apprentices opportunities that they may not otherwise have had, i.e., those that cannot afford to take time off work to study. This helps widen access to professions and create more equality and diversity in a workforce

Physician Associate Apprenticeship – End Point Assessment

End Point Assessment

End Point Assessment is unique to apprenticeships and takes place after the apprentice has reached a virtual gateway, where they have achieved level 2 maths and English (or equivalent), have achieved all of the knowledge, skills and behaviours listed in the apprenticeship standard and have achieved any mandatory qualifications. The RCP is currently the End Point Assessment Organisation in principle although this is likely to change when the role becomes regulated. The End Point Assessment is currently the FPA national exam.

When an apprenticeship becomes integrated, the End Point Assessment is aligned with the degree awarding process & professional registration. It is expected that once the Physician Associate role becomes regulated the End Point Assessment will become integrated and therefore the End Point Assessment will no longer sit with the FPA as a separate End Point Assessment Organisation. It will be part of the degree awarding process from the apprenticeship provider (HEI). Apprentices will therefore take the FPA national exam as part of their integrated apprenticeship programme. HEIs who deliver End Point Assessments will need to register as an [End Point Assessment Organisation with ESFA](#). HEIs providing apprenticeships will be registered with the [Register of Approved Training Providers](#).

The apprenticeship is designed to prepare successful apprentices to sit and meet the requirements of the Physician Associate National Examination (PANE) in order to qualify as a physician associate and be admitted to the Faculty of Physician Associates' Managed Voluntary Register (PAMVR). Although registration to the PAMVR is not mandatory it is required by most UK employers and is encouraged by the GMC as the profession approaches regulation. It is anticipated that the PAMVR will transfer into the agreed statutory register.

Will intergraded assessment also occur for the traditional route?

No, the end point assessment is specific to the apprenticeship route and integration of end point assessments is currently underway for any regulated profession which has an apprenticeship standard available.

Physician Associate Apprenticeship - Placements

Can employers reduce Physician Associate student placements on the non-apprenticeship route and increase apprentices in our workforce?

The aim of the apprenticeships is to increase the number of trainees in the workforce; therefore it is not advisable to prioritise apprenticeships over traditional learners, we would advise using apprenticeships to increase workforce numbers alongside traditional learners.

How do employers manage capacity in clinical practice for Physician Associate students alongside apprentice learners?

We understand the challenges in placement capacity, the funding available from HEE may support some short-term solutions. We advise that employers and systems engage with their HEE clinical placement teams and ICS colleagues support the development of regional placement strategies in the longer term.

During the apprenticeship, where will training placements need to be undertaken? Will placements need to be undertaken in both primary and secondary care, similar to the current Physician Associate programme?

As a generalist role, Physician Associate apprentices will be required to undertake placements in other specialties and sectors. Apprentices will be required to undertake the same rotations as a Physician Associate student in the traditional university route, including primary and secondary care, acute medicine and surgical.

Will the apprentice still need to cover all the different specialties that current Physician Associate students complete.

Yes, this will still be a requirement. Apprentices will do exactly the same qualification as non-apprentice PAs, so they will achieve the same qualification at the end and will need to cover the same requirements during their programme as non-apprentice Physician Associates.

Physician Associate Apprenticeship – Training Providers

Physician Associate Apprenticeship Training Providers

Once the procurement process has been completed, a list of Physician Associate apprenticeship providers who have been successful under that procurement will be shared with employers.

What is the timeline for procurement?

It will be a national procurement for the apprenticeship standard, as we do with other apprenticeships, which will then allow employers to select from successful providers in sourcing their own needs. The successful providers will also form the regional implementation groups (where run). The timeline is currently indicative as follows:

Invite to Tender	Allow provider market opportunity to respond to requirements	Early January 2022
Invite to Tender Close	Bid Submission date for providers	Early February 2022

Will you be telling HEIs in regions about the employer demand in the local area?

Indicative employer demand data will be included in the tender specification.

Can employers choose which University they want to deliver the apprenticeship standard?

Employers will choose the apprenticeship provider they would like to use. The procurement exercise will provide a list of apprenticeship providers who have been through a rigorous quality assessment process. It will also avoid you from having to undertake your own individual procurement exercise and will ensure the correct service contract is in place once you have sent your order form to Salisbury. You can select an apprenticeship provider who is not on this procurement, however, if you do this you may have to undertake your own procurement exercise

and you will not receive any of the provisions we have secured via the procurement unless you re-negotiate these via your own procurement.

What support is there for apprentices who have additional needs and learning difficulties ?

Apprenticeship providers should support learners who have additional needs or learning difficulties and are able to access a specific budget to fund necessary support. Please speak to your apprenticeship provider about any support an apprentice may need.

When will the apprenticeship start?

The start date of the apprenticeship will depend on employer need and also HEI readiness. We will be gathering this information from employers in due course and also from HEIs during the procurement process.

How does the Recognition of Prior Learning process work?

Recognition of prior Learning is an essential part of the apprenticeship learner eligibility assessment. Apprenticeships must provide new, significant learning and apprenticeship funding must not be used to pay for skills, knowledge and behaviours already attained by the apprentice. The apprenticeship provider must therefore account for the apprentice's prior learning. This is previous learning that may count towards an apprenticeship, for example, work experience, education, training and qualifications.

Before a learner starts an apprenticeship, apprenticeship providers must do an initial assessment of the prospective apprentices existing KSBs to check if they are eligible; all the knowledge, skills and behaviours set out in the standard should be considered in reviewing the prior learning of the apprentice.

Where the individual has prior learning necessary to achieve occupational competence, the content and length of the apprenticeship may be reduced and a lower price charged for the apprenticeship. Further information is available using [this link](#).

HEIs are likely to have an APEL policy that they will use to support the learner in accrediting previous experiential learning. This is where learners apply for credit for previous learning which has not been assessed and awarded credit.

Does the RPL mean that the programme would be individual for each apprentice?

Yes, apprenticeships should be individual to each apprentice due to the requirement of RPL. RPL allows qualifications and experience to be taken into account when conducting the initial skills scan against the knowledge, skills and behaviours of the apprenticeship standard, therefore it is likely that different apprentices will have different outcomes and therefore different starting points / individual learning plans on the apprenticeship.

Physician Associate Apprenticeship – Information, Advice and Guidance

Will there be support and guidance available?

Yes, the national Talent for Care Team will work with local HEE Physician Associate teams to develop ways to guide colleagues in understanding and implementing apprenticeships.

You can also find lots of useful information about apprenticeships on our website, where you will find a wide range of apprenticeships, case studies, resources and all the latest apprenticeship news - <https://haso.skillsforhealth.org.uk/>.