

PAAs and AAs: ADM3 Knowledge and skills

Introduction

1. This guidance is for authorised decision makers ('ADM's') asked to consider whether Physician Associates (PAs) and Anaesthesia Associates (AAs) applying for registration meet the standards of knowledge and skills, determined by us under article 3(1) of the Anaesthesia Associates and Physician Associates Order (AAPAO).
2. This guidance aims to ensure consistency, fairness and proportionality in our approach to making decisions. ADMs should read it in conjunction with the ['Principles which apply to decision-making'](#), across all our registration and revalidation functions.
3. This guidance sits under our [Registration evidence framework](#), which sets out the overarching policy for PA/AA registration.

Basis for assessing evidence of knowledge and skills

4. The AAPAO requires us to determine standards applicable to associates, and sets out what these must relate to. This includes 'knowledge and skills'¹ and we have set these as two of the nine standards that applicants must demonstrate they meet when applying for registration².
5. The procedural requirements that applicants for PA/AA registration must comply with are set out in the General Medical Council (Registration) (Anaesthesia Associates and Physician Associates) Rules³ ('the registration rules'). The rules specify the information which must accompany a registration application⁴, and we explain how applicants can demonstrate the standards of knowledge and skills, and the types of evidence ADMs may accept in our:
 - [Registration evidence framework](#), and
 - [demonstrating knowledge and skills during the transition period policy](#).
6. To assess whether an applicant meets the standards of knowledge and skills, ADMs must assess evidence of the applicant's training, experience and assessments which are relevant to the application, including the dates undertaken⁵. The rules give us powers to make further enquiries, and/or to undertake verification checks⁶.
7. Where discretion is exercised to accept evidence to demonstrate one of more parts of the

¹ Under Part 2, Article 3(2)(b) of the AAPAO.

² Under Part 3, article 6(1)(a), of the AAPAO.

³ made under paragraph 4(1)(a) of Schedule 4 of the AAPAO.

⁴ Under part 2, rule 5(2)

⁵ Under part 2 rule 5(2)(e).

⁶ Through enquiries, and/or requests for information under rule 6(1), and/or verification under rule 6(5).

standards or information requirements for registration, ADMs must be satisfied of this in the context of the totality of the applicant's overall evidence.

Meeting the evidence requirements for knowledge and skills

8. The standards of knowledge and skills are set at the level of a new graduate from a UK PA or AA training programme. The threshold for meeting the standards of knowledge and skills is set out in the registration evidence framework. Our [demonstrating knowledge and skills during the transition period policy](#) explains how applicants who passed a knowledge and skills assessment more than two years ago can demonstrate they meet the standard.

Acceptable registration assessment

9. The majority of applicants will demonstrate that they meet the standards of knowledge and skills by providing evidence of a recent pass (within two years prior to application) in a GMC approved registration assessment⁷.
10. Where an applicant has never passed a registration assessment they will be required to.
11. We have provided guidance below which applies during the transition period⁸ where a registration assessment is more than two years old.
12. The UK AARA is a new knowledge assessment required for AA students who started their courses from September 2023 onwards. The clinical skills of UK AA graduates are assessed through workplace-based assessments that form part of their vocational AA training programme.
13. During the transition period, we will not require AAs who qualified in the UK before September 2023 to sit the AARA if they have recent employment as an AA in the UK (see below). This is because their knowledge and skills will have been previously assessed directly through their vocational AA training programme, resulting in the award of their qualification. This combined with recent employment practise is likely to be sufficient evidence to demonstrate the standard.

Recent UK practice (only applicable up until 12 December 2026)

14. During the transition period only, where an applicant passed a GMC approved registration assessment more than two years prior to their registration application, ADMs may consider that they have met the standard of knowledge and skills if they can provide evidence that they have practised continuously in the UK as a PA/AA for the six months immediately prior

⁷ The registration assessments we accept are set out in the Registration evidence framework.

⁸ Under the AAPAO, Article 19(1)(b) (which relates to the use of the title anaesthesia associate or physician associates) will not take effect until 13 December 2026. This means there is a two-year transition period for individuals with a relevant PA/AA qualification who are practising as PAs or AAs in the UK to gain GMC registration.

to application⁹.

15. Evidence of UK practice as a PA/AA must be supported by satisfactory employer references to verify the evidence, and provide objective and independent confirmation of the appropriateness of knowledge and skills demonstrated by the applicant.
16. Where an applicant can't evidence some or all of the prior six months, but has evidence of UK practice as a PA/AA in the two years prior to application, ADMs may still consider this as evidence of their knowledge and skills, but may need supplementary evidence to allow them to determine if the standard has been met.
17. Our [demonstrating knowledge and skills in transition policy](#) provides guidance around considering an applicant's pattern of practice, when supplementary evidence is required, and the forms this might take, in order to support reaching fair and consistent decisions.
18. ADMs are not fettered by the criteria and have discretion to depart from it where they have a justified reason for doing so.

Factors to consider

19. ADMs should use the checklist below to help them decide whether an applicant has provided satisfactory evidence that they meet the standards of knowledge and skills.
20. All decisions must be made on a case-by-case basis and take into account the associate's individual circumstances.
21. The evidence ADMs rely upon to reach a decision must be robust, objective, independent and verifiable.
22. ADMs will need to consider:
 - whether any of the information available identifies any concerns about the applicant's knowledge and skills, and if so
 - whether there is sufficient robust, objective, independent and verifiable information to provide assurance that the applicant has fully addressed these concerns to the extent that we would continue to fulfil our duty for public protection if the applicant were granted registration?
23. If an ADM is not satisfied then the application must be refused¹⁰.

Checklist

24. When considering whether an applicant has provided satisfactory evidence that they meet the standard of knowledge and skills, ADMs should consider in all cases:

⁹ We can request evidence of an applicant's employment history under rule 5(2)(c) 'details of the applicant's employment history, where relevant to the application'.

¹⁰ Under rule 6(9)(b)(i)

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- whether they have passed a GMC approved registration assessment, and
 - the period of time that has elapsed since they passed the registration assessment (where this is two years or more, see paragraph 26).
25. In considering whether a registration assessment is a GMC approved assessment, ADMs should consider the below points:
- Where an applicant is relying on a pass in the USA's Physician Associate National Certifying Examination (PANCE): that their US qualification and PANCE pass was the basis for them being admitted to the Faculty of Physician Associates' Voluntary Managed Register.
 - Where an applicant is an AA who has not undertaken the AARA: that they graduated, or started their courses prior to September 2023 and that they meet the employment criteria below.
26. Where an applicant's pass in a GMC approved registration assessment is more than two years old, ADMs should consider any UK PA/AA practice history. In all cases ADMs should consider:
- whether they have practised continuously in the UK a PA/AA¹¹ for the six months immediately prior to application, and
 - whether they have satisfactory employer reference(s) for all posts.
27. If the applicant meets the above criteria then ADMs are likely to be satisfied that they meet the standards of knowledge and skills.
28. Where an applicant cannot evidence six months continuous practice as a PA/AA in the UK immediately prior to their application, ADMs should consider the pattern of practice, including the:
- duration of their recent period(s) of practice
 - total amount of practice in the preceding six months, at the point the decision is being made
 - the length of any gaps in practice, and the degree to which this break may have impacted on the degradation of the applicant's knowledge and skills
 - the amount, duration and continuity of practice prior to any gap, and whether this mitigates the potential impact of the gap in practice¹²
 - the reasons for any extended breaks in the applicant's practice (or example, whether the applicant has been on parental leave, or absent through ill-health, or, not engaged in a professional capacity as a PA/AA).

¹¹ By practice as a PA or AA in the UK, we mean employed in a clinical role as a PA or AA, or a teaching or research role using the knowledge, skills, attitudes, and competencies initially obtained through their PA/AA training programme.

¹² on the basis that research suggests a higher level of learning and proficiency prior to hiatus indicating a higher level of retained skill, and that continuity of prior practice provides assurance that the previous employer was able to gain a good oversight of the applicants practice, and that any concerns with the applicants practice were more likely to have been identified, reported and/or managed.

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29. Where the reason relates to parental leave or ill health, ADMs should take into account statutory protections, such as maternity leave and disability, when applying discretion and making decisions, and consider these applications on a case-by-case basis.
30. Whilst ADMs must in all cases be assured that the applicant meets the standard of knowledge and skills, ADMs might apply discretion to the activity, or lack of activity, undertaken during the period of absence relating to the statutory protection.
31. Whether the applicant has provided objective verifiable supplementary evidence of:
- PA/AA related, UK based CPD, refresher training, or a return-to-work course, and/or
 - further successful completion of UK postgraduate study restricted to the PA/AA professions, for which the award of a PA/AA qualification is a condition of entry.
32. ADMs may take this evidence into account when making their decision. Supplementary evidence alone (eg CPD and/or postgraduate study) is highly unlikely to provide sufficient assurance that an applicant meets the standards of knowledge and skills.
33. While our policy includes evidence of CPD and/or reflections on learning as evidence applicants can provide to help demonstrate that they meet the standards of knowledge and skills, ADMs should not take inference from applicants choosing not to provide this evidence¹³, and we may not insist that this is provided.
34. When considering CPD related to the PA/AA role, as evidence of how an applicant has maintained their knowledge and skills while out of practice, ADMs will need to consider:
- the subject matter of CPD, and whether this is targeted to both the breadth of core generalist knowledge and skills¹⁴, as well as CPD directly relevant to the applicant's practice
 - whether the applicant has taken a targeted and structured approach to CPD, for example whether this is supported by an overarching personal development plan
 - the format of CPD, and the proportion of participatory learning,¹⁵ versus online learning. Decision makers will need to take into account whether there are valid reasons why online learning was the best available way for the applicant to keep their knowledge and skills up to date, for example if caring responsibilities or remote location meant the applicant found it difficult to attend learning related to their practice as a PA or AA with others

¹³ Under rule (6)(2): 'a request under paragraph (1)(b) may not require an associate to provide material produced by that associate: (a) for the purposes of professional development; or (b) in the course of reflecting on their professional practice in order to improve on it.'

¹⁴ See the list of areas of clinical practice at Domain 3 of the [Physician Associate Registration Assessment \(PARA\) content map](#), or for AAs at domains 3 and 4 of the [Anaesthesia Associate Registration Assessment \(AARA\) content map](#), for guidance on the breadth of core generalist knowledge and skills expected.

¹⁵ Participatory learning means undertaking activity that involves interaction with one or more other professionals. Examples include attendance at courses, seminars, symposiums, and conferences or distance learning with academic accreditation relevant to their practice as a PA or AA.

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- the relevance of the CPD to the applicant's practice
 - whether evidence demonstrates the applicant has reflected on and learned from the CPD they have undertaken¹⁶
 - if any of the CPD includes a summative assessment – providing objective evaluation of the knowledge and skills level attained through the CPD undertaken.

35. When considering further successfully completed UK postgraduate study restricted to the PA/AA professions, for which the award of a PA/AA qualification is a condition of entry, ADMs should consider:

- whether it includes an assessment of knowledge and skills across the PA/AA role, providing robust and objective evidence of level of knowledge and skills in the PA/AA role.

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¹⁶Under rule (5)(2): 'A request under paragraph (1)(b) may not require an associate to provide material produced by that associate: for the purposes of professional development; or in the course of reflecting on their professional practice in order to improve on it'.