

Regulating anaesthesia associates and physician associates: consultation on our proposed rules, standards and guidance

How to take part in the consultation

From Tuesday 26 March 2024 to Monday 20 May 2024, we'll consult on the draft rules, standards and guidance needed to implement the regulation of PAs and AAs. We'll also use this consultation to ask for views on draft principles to inform the content of fitness to practise decision making guidance that will apply to all registrants – doctors, PAs and AAs – from the end of this year.

You will be able to take part in the consultation via our website at: <https://www.gmc-uk.org/pa-and-aaregulation-hub/regulating-aas-and-pas-consultation>

We encourage responses through our online consultation tool, but our website also has information about alternative ways to take part.

We have made our proposals as clear and accessible as possible to ensure that anyone who wishes to share their views has an opportunity to do so.

We will promote the consultation across all our communication channels throughout the period that the consultation is live.

If you have any questions about this briefing document or the consultation, please contact <redaction s40(2)>, Assistant Director Regulation Policy, <redaction s40(2)> and we will get back to you as soon as possible.

Background

In 2017, the UK government consulted on whether PAs and AAs should be brought into statutory regulation and, if so, who the regulator should be. The clear [outcome of the public consultation](#) was that they should be regulated.

In 2019, the UK government, with the support of the devolved governments, asked that we regulate both professions.

Legislation introducing this requirement into law was laid in the UK and Scottish Parliaments in December 2023 and subsequently approved. This now sets out a legal duty for us to regulate PAs and AAs from the end of this year.

Although the number of PAs and AAs remain relatively small, they are expected to grow steadily in the next few years. While this is not a matter for the GMC or this consultation, it underlines the importance of PAs and AAs being brought into statutory regulation as soon as possible.

Regulation will help to assure patients, colleagues and employers that PAs and AAs are safe to practise and can be held to account if serious concerns are raised.

The introduction of regulation of PAs and AAs is the first, in a series of steps that will reform professional healthcare regulation over time. The UK government has committed to future reform of the legislation that governs how we regulate doctors which will enable us to be a more relevant, effective and compassionate regulator for all our registrants.

The current debate

The consultation will take place during a period of intense debate about the roles and deployment of PAs and AAs in the health services. While there's more to do across the system to address these concerns, this consultation isn't about those matters. It's specific to how we'll implement the legislation passed by the UK and Scottish Parliaments which legally requires us to regulate PAs and AAs from December 2024. It cannot, and does not, reopen decisions that have already been made or settled in law, including:

- whether PAs and AAs should be brought into statutory regulation
- whether they should be regulated by the GMC or another body
- any aspects of the legislation introducing regulation
- professional titles of anaesthesia associate or physician associate

What the consultation covers

We're consulting on the draft rules, standards and guidance needed to implement the regulation of PAs and AAs. We'll also use this consultation to ask for views on draft principles to inform the content of fitness to practise decision making guidance that will apply to all registrants – doctors, PAs and AAs – from the end of this year.

We have grouped our rules, standards, and guidance by regulatory function covering:

Education and training for PAs and AAs

- standards for PA and AA curricula and for delivery of PA and AA education
- our processes for approving and quality assuring the education and training provided

Registration of PAs and AAs

- information that must be recorded on the register for all PAs and AAs
- our responsibility for recording, amending, and maintaining register records
- requirements that PAs and AAs must meet to register with us and the process for doing so
- requirements that PAs and AAs must meet to re-enter the register if they have been removed or have removed themselves from the register, and the process for doing so
- the processes through which a PA's or AA's entry on the register can be removed

Dealing with concerns about PAs and AAs

- our processes for assessing, investigating, and adjudicating a concern

-
- our process for taking action because of a fitness to practise concern by issuing a warning or imposing a measure (restriction) on a PA's or AA's registration
 - our process for keeping fitness to practise measures under review

Changing and challenging our decisions

- our process for revising specified GMC decisions
- the process for internal appeals against GMC decisions

Fees

- our approach to charging fees for our functions

Improving regulatory processes for doctors

As well as asking for feedback on rules, standards and guidance needed to implement statutory regulation of PAs and AAs, the consultation also includes proposals that will apply to doctors' regulation from the end of this year.

We're seeking views on draft principles that will inform the content of fitness to practise decision-making guidance. The purpose of guidance is to support GMC decision makers and independent tribunals to make proportionate, transparent and fair decisions when considering if a doctor, PA or AA poses any current or ongoing risk to public protection, and whether regulatory action is required or not. Our aim in updating our guidance is to introduce a more streamlined, clear and accessible decision-making framework for everyone involved in the fitness to practise process.

We've included these proposals in this consultation to bring forward improvements for doctors where we're able to do so, within the legislation that currently governs our work.

Regulation is changing

In 2017, the UK government proposed changes to the way that we and other healthcare professional regulators operate.

The legislation that governs how we work was introduced over 40 years ago and is complex, overly prescriptive and slow to adapt to change. It has hampered us and other regulators in our efforts to protect the public and support those we regulate to deliver good, safe patient care.

The UK government has now started work to reform this legislation, which will allow us to respond more quickly and flexibly when patient safety is at risk, and better support good practice.

Reform will come in steps and will change professional healthcare regulation in the UK over time. The first step will make us a multi-professional regulator responsible for the regulation of PAs and AAs from the end of this year. It also lays the groundwork for future steps, including reform of the legislation that governs our regulation of doctors. Once this legislation has been introduced, we'll consult separately on the rules, standards and guidance required for doctors.

[You can read more about regulatory reform and the timeline to change on our website.](#)
