PA Program Medical Directors Are Important Advocates for the PA Profession: Results from a National Survey

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Background
ARC-PA mandates that PA programs include a physician medical director. However, ARC-PA no longer requires that PA program medical directors serve as advocates for their PA program.

The purpose of this study was to evaluate whether PA program medical directors are playing a role in PA advocacy and what factors correlate with this effort.

Methods
A mixed methods survey with grounded theory for thematic coding was developed after review of the literature, and the survey was piloted by the research team and PA faculty for content, and construct validity. 10 Likert-scale questions, and one open response question, “How have you publicly supported the PA profession?”

Surveys were emailed to 262 PA program medical directors and the response rate was 26%. R program was used for descriptive statistics, Chi-square, ANOVA, and Pearson correlation. Significance set at p-value <0.05.

Chat GPT was used for initial thematic coding. The research team conducted iterative analysis, coding development, and consensus for each response.

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<thead>
<tr>
<th>Prompt</th>
<th>Number</th>
<th>Number, Percent</th>
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<tbody>
<tr>
<td>Which degree do you hold?</td>
<td>N=69</td>
<td></td>
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<tr>
<td>MD</td>
<td>60 (87.0%)</td>
<td></td>
</tr>
<tr>
<td>DO</td>
<td>9 (13.9%)</td>
<td></td>
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<td>Which of the options below best describes your current gender identity?</td>
<td>N=64</td>
<td></td>
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<tr>
<td>Male</td>
<td>42 (65.6%)</td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>22 (34.4%)</td>
<td></td>
</tr>
<tr>
<td>Racial category with which you identify</td>
<td>N=69</td>
<td></td>
</tr>
<tr>
<td>White or European American</td>
<td>42 (61.6%)</td>
<td></td>
</tr>
<tr>
<td>Asian</td>
<td>8 (11.6%)</td>
<td></td>
</tr>
<tr>
<td>Black or African American</td>
<td>5 (7.4%)</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>4 (5.6%)</td>
<td></td>
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<tr>
<td>Prefer not to answer</td>
<td>10 (14.5%)</td>
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Association between prompts: “I publicly support the PA profession” and p-Value

1. “I support the name change from ‘physician assistant’ to ‘physician associate.’” p-Value 0.407
2. “I am concerned that PAs will decrease clinical job opportunities for physicians.” p-Value 0.935
3. “My medical director role in PA education only serves to fulfill a requirement for accreditation.” p-Value 0.800
4. “How many years have you held your current position as PA program medical director?” p-Value 0.557
5. “What is your current FTE allocation to your PA program?” p-Value 0.335
6. “Prior to working as a medical director of a PA program, I worked directly with PAs.” p-Value 0.707

Results
There was a significant association between the number of years since graduating medical school and the likelihood that the medical director was male, p<0.001.

Respondents expressed that PAEA, AAPA, and their state PA organizations were most supportive of their role as PA program medical director, compared with AMA and AOA, and their state PA licensing organization.

Ways PA program medical directors support PAs in ranked order:
1. Hiring and employment involvement
2. Networking and personal communication
3. Professional advocacy and public speaking
4. Teaching and academic involvement
5. Supporting PA advancement in leadership
6. Outreach and recruitment, especially for clinical rotations.

Conclusions
Exploring ways to support PA medical directors’ professional growth and advocacy for the PA profession could be advantageous to medical directors and PAs.

References

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