



ARMY PA FUTURING DISCUSSION WITH RAND: WHERE DO WE SEE OURSELVES IN 50 YEARS? WHAT CAN WE DO IN THE NEXT 15 YEARS TO GET US THERE?



Authors: ¹LTC Amelia M. Duran-Stanton, PhD, DSc, MPAS, PA-C; ² MAJ Jessica Horine, MPAS, PA-C
Brooke Army Medical Center and Headquarters, Installation Management Command, JBSA-Fort Sam Houston, TX; ² 2nd Infantry Division, Camp Humphreys, South Korea

Disclaimer: Authors' views do not reflect the official policy of the Department of Army, Department of Defense, or the U.S. Government

Introduction

The PA profession celebrated its first 50 years in 2017. US Military PAs need to take the time to assess where they see themselves in the next 50 years and beyond.

The Army PA community asked RAND (Research and Development) Corporation to lead a visioning discussion with Army PA Senior Leaders on the aspirations, challenges and priorities for the use of PAs in the next 50 years.

Purpose

In the last 50 years, PAs have met and exceeded the original intent for providing battalion level care on the battlefield and in garrison. They have developed specialties and residencies and are sought out for leadership positions.

We need to open the aperture of what we are currently doing, explore all of the "what ifs" and let our minds take us into a realm of the unimaginable and make them possibilities for the future of PAs in the Army.

The purpose of this event was to provide the framework for a discussion of where military PAs see themselves within the future framework of military medicine and what we need to do in the next 15 years to start getting us from where we are today to where we see the profession going.

Background

The PA profession celebrated its 50 year anniversary in 2017. Army PA Senior leaders conducted a teleconference with RAND to develop a strategic framework for Army PAs for the next 50 years and beyond.

The teleconference was conducted on 25 September 2018 with 11 Army PA Senior leaders and three RAND subject matter experts. Army PA Senior leadership developed four questions with RAND for discussion.

Method

Expert panel discussion of 11 senior Army PAs facilitated by three RAND US Military medical experts.

Results

Four questions emerged and were discussed by the panel with guidance from RAND. Follow on research was identified by the group to facilitate future iterations of discussions.

Four Questions

- 1) How do Army PAs desire their scope of practice to change over the next 50 years?
- 2) How do Army PAs desire their breadth of specializations to change, and how do they see themselves differentiated from other medical providers 50 years from now?
- 3) How do Army PAs desire to allocate their focus between the MTF/Beneficiary mission and the operational medicine/MTOE mission over the next 50 years?
- 4) How do Army PAs desire to see their institutional role 50 years from now?

Q1. Scope Change

1) How do Army PAs desire their scope of practice to change over the next 50 years?

- Army PAs discussed their primary mission in supporting the Warfighter.
- The PAs identified a need to capitalize in **telemedicine** when providing continuity of care between physicians and PAs and medics supporting the Warfighter.
- The PAs discussed the potential for an **entry level doctorate PA** to be the new standard.
- The civilian use of PAs will be evolving to clarify the **difference between collaborative and independent practice**. In response to these changes, civilian PA organizations such as the American Academy of Physician Assistants lobby for federal legislative changes on how future PAs will be utilized. The changes in the civilian marketplace are eventually mirrored within the military medical system so they need to be monitored and implemented through regulation, policy and education as appropriate.
- Both the civilian and military medicine goal is to move toward a more **collaborative environment** as the nature of medicine changes.

Q2. Breadth of Specializations

2) How do Army PAs desire their breadth of specializations to change, and how do they see themselves differentiated from other medical providers 50 years from now?

- They see themselves focusing on the Warfighter with a vision of an interdisciplinary PA team based on operational need so they can focus on expeditionary care across the range of military operations.– be that at the **primary care level** or broadening their knowledge in other subspecialties.
- Army PAs also want to be clinically relevant as **master clinicians** and involved in the Army institutional construct by holding leadership positions within training, doctrine, curriculum development and graduate and post-graduate medical academia.
- The Army PA profession will monitor the Military Health Care (MHS) System to respond to **emerging requirements** secondary to physician shortages or **expanding mission** profiles.

Q3. Allocation Focus

3) How do Army PAs desire to allocate their focus between the MTF/Beneficiary mission and the operational medicine/MTOE mission over the next 50 years?

- Army PAs discussed the transition to DHA with the potential ability to have **interchangeability between services** and will maintain proficiency by working in civilian facilities while performing their military duties and responsibilities.
- There is an opportunity to further our work with sister services, federal agencies, and to position PAs into **senior clinical and supervisory roles**

Q4. Institutional Role

4) How do Army PAs desire to see their institutional role 50 years from now?

- Army PAs see themselves as the **center of gravity** in operational medicine.
- Army PAs are subject to **multiple career paths** and they foresee a PA at every level of command, tactical to strategic, performing as senior advisors and in key billets.
- Army PAs see a need to educate leadership at every level on their value and the parity of having general officer representative from the SP Corps.
- The SP Corps is expeditionary and supports the Warfighter especially with the emerging role of the Holistic Health and Fitness Model (H2F) where all areas of concentration in the Specialist Corps will have a role.

RAND Recommendations

RAND recommends the Army PA community continue with more in depth conversations to intentionally build upon this event. They also recommend:

- Adjusting PA future initiatives discussion to a **15 year timeline** for more foreseeable and actionable plan.
- Discussing trends affecting the PA community and the implications of those trends on policy and education. This will allow the Army PA community to prioritize efforts towards those trends and indicators to maximize impact.
- Ask ourselves "How will the strategic policy and education changes made in response to the trends and indicators improve our ability to support to the Warfighter on future battlefields?"

Discussion

Current Senior PA Leadership would like to capitalize on the last 50 years' successes by Army Physician Assistants and move toward the future in an intentional manner. In order to do this, understanding where PAs started and where they have gone from that initial concept is important. But more important is forecasting where PAs will be best utilized to support the health of the Warfighter in decades to come.

There are various methods of forecasting what the future could look like.¹¹ It would be easier if predicting where PAs will be in 50 years relied solely on historical mathematical data inputs and objective trend variables, but when looking at a relatively young profession that has many internal and external influences, the task becomes much more complex. It requires an understanding of the multivariable environment in which the Army PA works. Therefore, the initial phase of the project utilized expert panel discussions.

The expert panel discussed the possible influencing forces and decided on the variables that will exert the majority of the influence on the Army PA profession. This included factors internal to the Army as well as external variables. The result was identifying five topics that the Senior PA Leaders thought would have the most significant influence on how and where PAs are best utilized in the military in the next 50 years.

Conclusion/Future Steps

The Senior PA Leadership team, through the discussions led by RAND, determined that an in depth look at the trends in clinical, command and leadership, research, mentorship and strategy were required. Looking at these trends in both the military and civilian medicine are required. These topics were driving forces in determining how the future of PAs would be utilized and therefore, needed to identify routes to get to where we wanted to go in the next 15 years. A group of Army PAs have started researching these topics to drive future discussions with Senior Leadership and RAND. Additionally, military PAs were surveyed based on the four questions generated from this initial discussion with RAND.

Bibliography

1. Navy Medicine. Air Force and Navy Medicine Integrate at See. August 9, 2016. Accessed July 21, 2018. http://www.navy.mil/submit/display.asp?story_id=96100
2. Journal of Extension. Futuring: The Implementation of Anticipatory Excellence. April 2004. Accessed July 21, 2018. <https://joe.org/joe/2004april/comm1.php>
3. Inovo. Future Thinking: An Innovative Mindset for Innovative Action. November 14, 2014. Accessed July 21, 2018. <https://www.theinovogroup.com/future-thinking-an-innovative-mindset-for-innovative-action/>
4. Helmer, Olaf. Analysis of the Future: Delphi Method. RAND. March, 1967. Accessed July 21, 2018. <https://www.rand.org/pubs/papers/P3558.html>
5. DHA. Migration to Defense Health Agency to Modernized Army Medicine Surgeon General Says. May 2, 2018. Accessed July 21, 2018. <https://health.mil/News/Articles/2018/05/02/Migration-to-Defense-Health-Agency-to-modernize-Army-medicine-surgeon-general-says>
6. Tier Seven. Military Health System (MHS) to Defense Health Agency (DHA) – 2018 R&D Changes. January 23, 2018. Accessed July 21, 2018. <https://tier7.us/mhs-to-dha-2018-rd-changes/>
7. Walker, R. "Are we ready? Command Team Leader Development and Training Session CTLDTs." July 19, 2017. Accessed July 21, 2018. <https://www.youtube.com/watch?v=95A5fN2eVrQ&feature=youtu.be>.
8. Command, Army Medical. "Army Medicine Vision: Premier Expeditionary and Globally Integrated Medical Force." Army Medicine. 2017. Accessed July 21, 2018. <https://armymedicine.health.mil/-/media/Files/ArmyMedicine/Documents/ArmyMedicineVision.ashx>.
9. Command, Army Medical. "2018 Army Medicine Campaign Plan." Army Medicine. March 1, 2018. Accessed July 21, 2018. <https://armymedicine.health.mil/-/media/Files/ArmyMedicine/Documents/ArmyMedicine2018CampaignPlan.ashx>.
10. West, Nadja. Medicine is Key for Army Futures Talk. May 9, 2018. Accessed July 21, 2018. <https://www.ousa.org/news/medicine-key-part-army-futures-talk>

CORRESPONDING AUTHOR: LTC Amelia M. Duran-Stanton, PhD, DSc, MPAS, PA-C
amelia.m.duranstanton.mil@mail.mil

[The views expressed in this presentation are those of the authors and do not reflect the official policy of the Department of the Army, or the Department of Defense.]



Army Physician Assistants working across the range of military operations: 1) first Army PA class; 2) medic training; 3) medical outreach in Iraq; 4) participating in civilian professional development at AAPA 5) PAs have served as Warrant Officers to Colonels; 6) training with ally counterparts in Europe; 7) clinic leaderships; 8) partner nation training; 8) joint field exercises; 9) infrastructure development through surgical skills training in AFRICOM