The Path: Developing an "Acting Intern" Advancement Pathway for Physician Assistant Students on the Pediatric Wards

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Background: At the University of Colorado, physician assistant students (PAS) who complete an inpatient pediatric rotation at Childrens Hospital Colorado have limited opportunity to practice higher level clinical skills, such as care plan execution and writing billable notes. These responsibilities have been reserved for fourth year "acting intern" (AI) medical students. Nationally 41.6% of PAS graduates first work in a hospital setting, where billing and care planning are integral job responsibilities. To address this gap in PAS clinical education, we developed the Acting Intern Advancement Pathway to offer select students' clinical responsibilities commensurate with that of a graduating medical student on the inpatient pediatric wards. To qualify for the pathway, PAS must self-identify, express career interest in inpatient or pediatric medicine, and demonstrate clinical aptitude across six domains, as assessed by the RIME framework by their clinical supervisors, early in the rotation.

Objectives: To describe our first year of experience with the novel Acting Intern Advancement Pathway and evaluate its feasibility as assessed by its impact on the PAS' clinical supervisors.

Methods: The Acting Intern Advancement Pathway was advertised to all PAS transitioning into clinical rotations in the 2022-2023 academic year. Supervising attendings, fellows, and senior residents were notified of PAS on the pathway. To assess the supervisor's experience with an AI PAS, we developed a web-based survey, which was reviewed and revised by a survey methodologist and through cognitive interviews. The survey included questions about demographics, perceived feasibility of supervising pathway PAS and the value of the pathway, as rated on an ordinal response scale. Descriptive statistics were used to analyze results.

Results: Four PAS participated in the AI Advancement Pathway and worked with 23 supervisors in 2022. One student did not complete the pathway. Survey response rate was 87% (20 of 23). Respondents included 4 senior residents, 1 hospital medicine fellow, and 15 hospitalist attendings. Senior residents worked with the PAS for their month rotation. Fellows and attendings supervised for one week. The 4 senior residents completed direct observations required for the PAS to advance to AI status. They all agreed completely or quite a bit that direct observation and feedback was a doable, reasonable, and sustainable amount of work. Clinical supervisors overall agreed completely or quite a bit that supervising an AI PAS was doable (85.7%), reasonable (100%), and sustainable (100%). 95% agreed completely or quite a bit that it is important to offer PAS advanced clinical care responsibilities as an AI.

Conclusion: The Acting Intern Advancement Pathway is a promising means of enhancing the inpatient pediatric education of PAS. While the pathway requires additional effort of the clinical supervisors, they

found the pathway to be feasible and important. Our data are limited by small sample size. We will continue to track the clinical supervisor experience in upcoming academic years. Next steps include optimizing the pathway based on feedback and studying the experience and impact of this novel pathway on its participating students."