



**Te Kaunihera Rata  
o Aotearoa**

Medical Council  
of New Zealand

## Frequently asked questions

### Regulating the Physician Associate profession (PAs)

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#### **Q: What is a PA?**

**A:** PAs are trained health professionals who work under the supervision of a medical doctor to provide healthcare to patients. PAs are known globally as both Physician Assistants and Physician Associates. The New Zealand government has decided that, in New Zealand, the profession will be known as Physician Associates.

The profession began in the United States in the mid-1960s in response to a growing need for healthcare providers. Regulation of PAs commenced in the US in the 1970s. The profession is also regulated in Canada and (since December 2024) the UK. There are understood to be around 50 PAs working in New Zealand at present.

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#### **Q: Why are PAs being regulated?**

**A:** The Minister of Health is responsible for decisions on whether a health profession should be regulated and has set out its rationale for his decision [here](#). In late December 2024 the Ministry of Health advised the Medical Council that Cabinet had confirmed that PAs would be regulated in New Zealand, and that the Council would be designated as the regulator. This is a similar model to the UK, US and Canada, where the medical regulator also regulates PAs.

PAs will be regulated under the Health Practitioners Competence Assurance Act 2003 (the HPCA Act). This same legislation is used to regulate all other regulated health professionals, including doctors.

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#### **Q: When will PAs be regulated?**

**A:** The Council is developing the regulatory framework within which PAs will practise. This includes, setting a 'scope of practice' to define PA practice, developing competencies, and identifying the necessary qualifications for registration. We also need to specify supervision requirements and develop tools to support doctors and PAs working together.

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#### **Q: How will the cost of regulating PAs be covered?**

**A:** Health New Zealand | Te Whatu Ora is contributing funding towards the establishment phase of PA regulation, over an initial two-year period. Following the completion of the Health NZ funding,

and to the extent not covered by the Health NZ funding, the costs of regulating PAs will be recovered from the PA profession itself. There will be no cross-subsidisation between professions, and no cost burden on registered doctors.

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**Q: What has the Council learned from other countries regulating PAs?**

**A:** We've been closely exploring international practices, learning from both successes and challenges; our approach will include safeguards to minimise risks identified or experienced in other systems.

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**Q: In other countries, doctors supervise PAs. Will this be the case here, and if so, how will supervising more staff be helpful to doctors in the current workforce shortage?**

**A:** Yes, every PA will need to be supervised by a doctor. We are aware of the pressures already on doctors. We will develop a supervision framework that allows PAs to provide supervised services to patients and health consumers. It's too soon in the process to say what this will look like, but we will consult on a proposed supervision framework in due course. We also intend to provide guidance for commencing and developing a PA/doctor relationship in a way that enables mutual trust to develop while protecting patient safety.

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**Q: How will Council make sure patients are safe?**

**A:** Patient safety is our top priority, and the main reason the Council exists. Regulation will establish clear standards that each PA will need to meet for registration, and on an ongoing basis. Our requirements will be informed by international best practices, our own expertise as an experienced regulator, and through stakeholder and public consultation.

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**Q: How can stakeholders provide feedback?**

**A:** We will consult as we develop proposed material. You will be able to submit feedback through consultation forums, email, or our website submission portal.