



American Academy of
Physician Associates

PA's in Leadership: How do they get there?

A report from the 2022 PA Practice Survey

4/30/2024 • 2022 PA Practice Survey

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Abstract

PA leaders are an important part of healthcare systems across the country. However, little is known about the pathways PAs follow towards their leadership roles. In this final brief in a three-part series on PAs in leadership, we examine these leadership pathways.

Methodology

Data were collected in the PA Practice survey fielded quarterly over 2022, sent to approximately 30,000 PAs in the United States (U.S.) who had not opted out of AAPA research surveys for which AAPA had a valid email address. A series of questions related to PAs actions in a leadership role were included within the AAPA's PA Practice Survey. A total of 29,711 emails were delivered, 4,087 responded (response rate 13.8%) to the invitation, and 3,645 completed the full survey. The overall survey margin of error is +/- 1.42% at a 95% confidence level. Response rates and margins of error vary by section and breakout. "N" refers to the number of respondents and is generally the first column in the data tables. Totals do not always add up to 100% due to rounding.

This research is exempt from IRB approval in accordance with US Department of Health and Human Service's Policy for Protection of Human Research Subjects listed at 45 C.F.R. §46.104(d)(2)(ii). The author has no conflicts to report.

About PAs

PAs (physician associates/physician assistants) are licensed clinicians who practice medicine in every specialty and setting. Trusted, rigorously educated and trained healthcare professionals, PAs are dedicated to expanding access to care and transforming health and wellness through patient-centered, team-based medical practice. A PA's specific duties depend on the settings in which they work, their level of experience, and state law. There are approximately 178,000 PAs in the United States, who engage in more than 514 million patient interactions each year. To learn more about PAs, go to aapa.org.

About AAPA

Founded in 1968, the American Academy of Physician Associates is the national professional society for PAs (physician associates/physician assistants). It represents a profession of more than 178,000 PAs across all medical and surgical specialties in all 50 states, the District of Columbia, U.S. territories, and the uniformed services.

AAPA advocates and educates on behalf of the profession and the patients PAs serve. We work to ensure the professional growth, personal excellence, and recognition of PAs. We also enhance their ability to improve the quality, accessibility, and cost-effectiveness of patient-centered healthcare.

How to Cite

PAs in Leadership: How do they get there? 2024. American Academy of Physician Associates. Alexandria, VA.

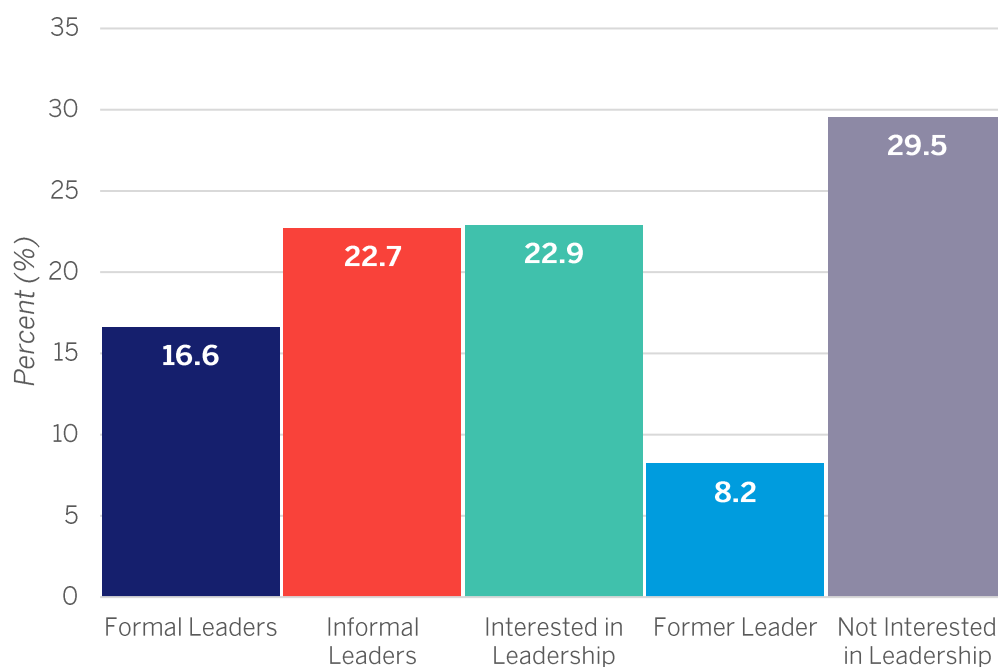
Executive Summary

Within the PA profession, leadership roles can function as a pathway for career advancement, opportunity for workplace task diversification, and a chance to mentor the next generation of practitioners. Despite the importance of PA leadership, few studies examine the demographic characteristics of PA leaders, how they get into leadership roles, or what they do within these positions. To fill this gap, AAPA has developed a series of data briefs to serve as a primer for those interested in learning more about PA leadership. In our third - and final - report of this series, we examine the pathways PAs took to secure a leadership role within their organizations.

Characteristics of PAs in Leadership

PAs often serve in formal and informal leadership roles. Formal PA leaders traditionally have a distinct title, such as Director, Manager, or Vice President; however, many are still referred to as physician assistants/associates. These leaders may also receive additional compensation and/or a greater number of leadership responsibilities. Informal leaders are PAs who participate in unofficial supervisory and/or educational duties that were not part of their official job duties. In the 2022 PA Practice Survey, almost 40% of PAs indicated they were currently in a formal or informal leadership role. Almost 30% of PAs were not in, or not interested in, leadership (Figure 1, Table 1). Most of the PAs in formal leadership had over 10 years of work experience (70.8%, Table 2). More information on the demographics of PAs in leadership can be found in [PAs in Leadership: Who are they?](#) Additional insights on what PAs are doing in their leadership roles can be found in [PAs in Leadership: What are they doing?](#)

Figure 1. PAs by Leadership Role



Pathways to Leadership

In the November 2022 fielding of the PA Practice Survey, we sought to identify the paths PAs took as they made their way into leadership positions. Previous work has indicated an important step on that road is mentorship. We found more than a fifth (21.7%) of PAs currently have a mentor who supported them in their pursuit of additional leadership opportunities (Table 3). Additionally, almost three in four (72.9%) PAs are serving as a mentor for PAs and/or APRNs. Within that group, 49.0% were performing this task informally (Table 4). To gather new insights, we also asked PAs to share their personal pathway to becoming a leader in their organization.

Coding the responses to this open-ended question revealed three general themes related to PAs leadership pathways (Figure 2). One path was often described as *serendipitous*, with leadership opportunities falling into place because of opportunity or circumstance. Another path was through *training*, with many leaders sharing how prior skills, experiences, and professional development opportunities led to leadership positions. The third path was more *aspirational*, with PAs providing examples of how they acted within their organizations to carve out their own leadership opportunities. In the following sections, we describe each of these leadership pathways in greater detail.

Figure 2. Definitions of Leadership Pathways

Leadership Pathways		
Serendipity	Training	Aspiration
Being asked to move into a leadership role, even if the PA was not interested in leadership at the time. Related to experience and practice environment.	Formalized instruction from a specific source, or combination of sources, such as organizational programs, additional degrees, and/or military service.	Working within an employer to develop a leadership position. Often starts as an informal role before becoming a formal leadership position.

Serendipity

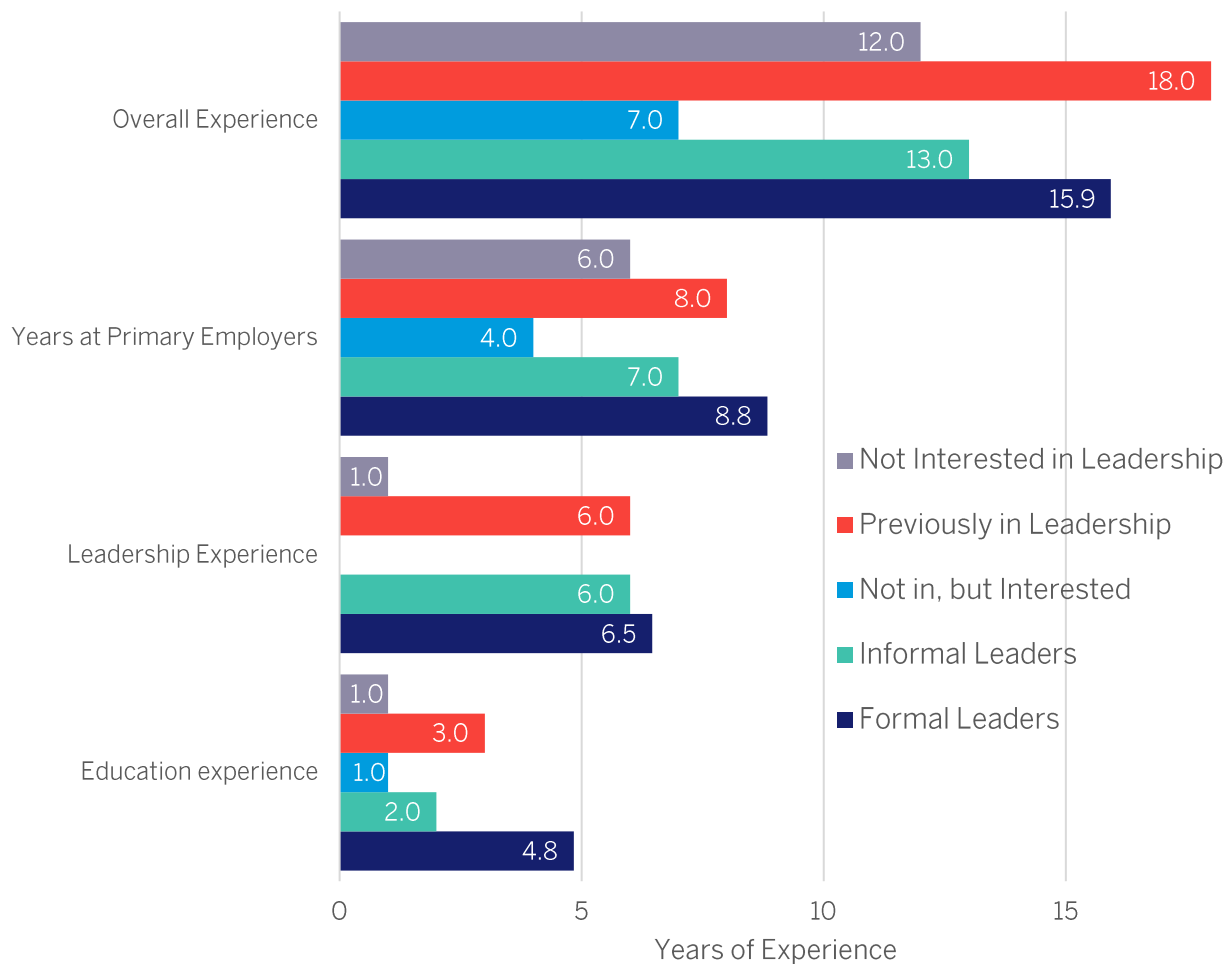
One path to leadership involved a degree of chance, or serendipity, where PAs were asked to take on the work leading to their recognition as a leader in the workplace. An example of this can be seen in the response shared by a PA in hematology/oncology who described their leadership pathway:

“Last year I was approached about being the APP coordinator for our inpatient APPs. I accepted as this is the first time a path forward had occurred in the 8 years I've been here.”

As echoed in this response, many PAs who are not in, but are interested in, leadership typically have an average of 7 years of experience. These PAs interested in leadership positions also have an average of five years of experience in their current specialty and four

years of work at their primary employer (Table 5, Figure 3). This interaction between experience and time on the job was also echoed by many PAs who shared how they fell into leadership positions at their employer over time as they became recognized for their knowledge, skills, and abilities by their colleagues. More information on the differences in mean years of experience based on leadership role can be found in Figure 3.

Figure 3. Years of Experience by Leadership Role



PAs also found themselves in a leadership role if they had a high degree of autonomy in their position or often practiced as the sole provider of care. This example of a pathway to leadership is represented in this submission we received from a PA in Family Medicine:

“After first year I was given role to lead homeless outreach/care. Was given full autonomy to run the program as I saw fit.”

Using their education and training, PAs around the country demonstrate they can work autonomously while leading care teams to ensure the delivery of safe patient care. Even though PAs may not always actively seek leadership roles, approximately 72% of PAs in leadership were interested, or very interested, in taking leadership roles when they were

initially offered. Moreover, PAs tend to remain in these leadership positions over time, with more than 3 in 4 (76.9%) of the surveyed PAs in leadership positions expressing they agreed, or strongly agreed, they were still interested in their leadership position (Table 6).

Training

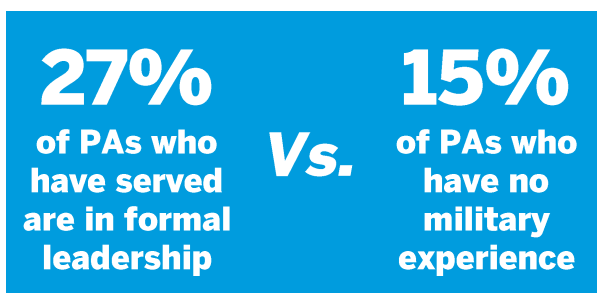
Many PAs indicated training in leadership skills was a key component of their pathway to securing a leadership position at their primary employer. There were three general sources of leadership training cited in our survey: military experience, organizational opportunities, and gaining training through additional degrees.

Military Experience

In the 2021 PA Practice Survey, we asked PAs if they have ever served on active duty in the U.S. armed forces, reserves, National Guard, or Uniformed Health Services. Only one in 10 PAs (9.3%) indicated they were currently serving, or had previously served, in one of those roles (Table 7). However, these PAs were also more likely to be formal leaders than those who had never served in the military (26.5% vs. 15.3%, Table 8). The effect of military training on the ability to enter leadership roles is reflected in this 2022 response from a PA in family medicine who had previously served:

“As a former military PA and experienced provider, this role now comes naturally as I coach, teach, and mentor junior providers, MAs.”

Specifically, PAs in our survey described how the leadership and skills training received by PAs who formerly served helped them educate, train, mentor, and lead other clinicians in their organizations. This transition from military leadership to clinical practice leadership is a natural progression for many former military PAs, but this pathway is not universal. Almost half (49.1%) of PAs who had served, or were currently serving, were not in formal or informal leadership roles when they were surveyed in 2021 (Table 8).



Organizational Opportunities

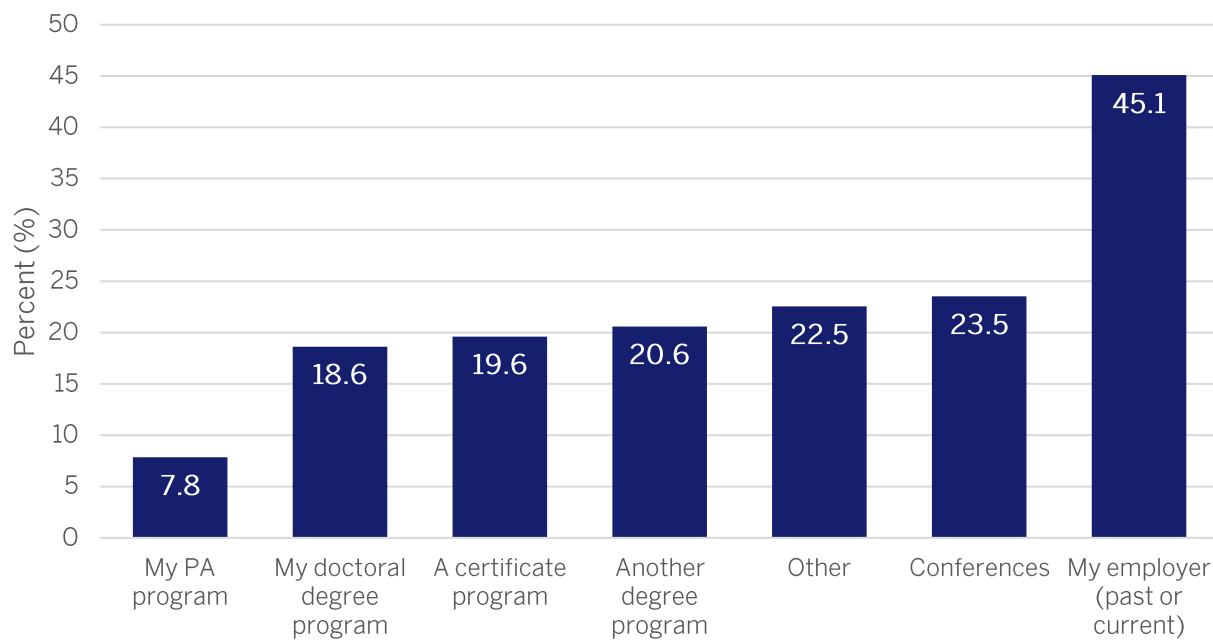
Only three in 10 PAs (30.0%) believe they receive enough support and/or training to grow into a leader at their current employer. This is similar to the proportion of PAs (27.0%) who agree, or strongly agree, that leadership learning and development efforts are aligned with their current employer's strategic goals and priorities (Table 9). These numbers illustrate how many PAs feel their employers should play a larger role in developing PAs into leadership positions. Quotations from our respondents illustrate how PAs with these opportunities for professional development at their employer are able to grow into effective leaders, as demonstrated by this response from a PA in an outpatient clinic or physician's office:

“I was recently offered and accepted the position of APP Director for my organization. Since February 2021, I worked on a committee designed to

enhance/improve the APP experience and it culminated in the creation of the APP Director position as well as a Transition to Practice Program that I will lead.”

Many PAs were supported in their efforts to become formal leaders by programs implemented within their organization. More than two in five (45.1%) PAs who responded to the November fielding of the 2022 PA Practice survey indicated they received leadership training from their employer (Table 10, Figure 4). Additional sources of leadership training included certificate programs, educational opportunities, and conferences, all of which could have been supported by professional development funds provided by the PA’s primary employer.

Figure 4. Source of PA’s Formal Leadership Training



Educational Programs

The final source of leadership training came from educational programs intentionally selected by PAs to improve their skills. As illustrated in Figure 4, almost two in five PAs who received formal leadership training obtained skills from a doctoral degree program, or some other degree program (39.2%, Table 10). The importance of educational training as a leadership path is illustrated by this response from a PA conducting research in the pharmaceutical industry:

“My director felt I was a great candidate to move into management. I also listed leadership in my individual development plan. I am currently enrolled in a DMSc program with graduation next year. I am working on informal leadership skills with my directors through case studies, reading assignments, and interviewing new employees.”

Among the PAs in formal leadership, over one quarter (27.3%) either currently have or intend to pursue an additional non-PA Master's degree. Similarly, almost one third (33.2%) have or intend to pursue a doctorate. Likewise, many PAs who were informal leaders (25.1%) or interested in leadership (20.2%) currently had, or intended to seek, a non-PA Master's degree (Table 11). For additional insights, we asked PAs what additional degrees they plan to pursue. Approximately two in five (44.4%) indicated they would pursue a DMS(c). The next two most selected degrees were MBA (18.8%) and MPH (16.0%, Table 12). PAs are using educational opportunities to bolster their existing clinical skillset or pick up additional skills related to business or healthcare administration.

Aspiration

Only 1 in 4 (25.5%) PAs agree or strongly agree there are leadership positions available to them within their primary employer (Table 13). Sometimes, PAs must carve out leadership opportunities within their organizations. For many PAs, the first step on the path to leadership involves actively participating as an informal leader before moving into formal leadership. While previous paths have demonstrated how PAs have leveraged their training or fell into opportunities to move into existing leadership roles, these instances differ in that PAs were actively working to build out their own leadership opportunity. An example of this can be found in the way one Neurology PA explained their own pathway to leadership:

“Out of frustration, a group of APPs made an APP council and I was elected as chair. Then the medical group I work for found it beneficial to have leads, I applied and was selected one of four APP leads to 50 or so APPs.”

In this instance, taking the steps to be seen as an organizational leader may have helped this PA when they applied for formal leadership positions at their place of work. Similar instances were shared by many PAs who asked for promotions, requested title changes based on changes in duties since being hired, or volunteered to fill empty leadership positions.

The COVID-19 pandemic also provided PAs opportunities to be seen as leaders within their organizations. Many shared how they took an active step to serve on COVID response committees, update existing protocols to reflect new pandemic realities, take over procurement processes to ensure staff had appropriate personal protective equipment, or take a larger role in the management of critical patients. A description of the leadership path taken by a PA in physical medicine and rehabilitation illustrates how stepping up in this time of crisis opened the door to leadership opportunities:

“When COVID-19 really hit us, I was put into the COVID response team and as time went on, even my physician partners would come to me for advice on the response of a COVID situation, so I have become the leader of the COVID response in the clinic.”

While many PAs are still feeling the systemic impacts of the COVID-19 pandemic in their clinical practice, their decisive actions during the health emergency led to earning respect and recognition from their colleagues. As we integrate the lesson learned from the pandemic

into the future of healthcare, PAs should also be on the lookout for new opportunities to grow into leadership positions.

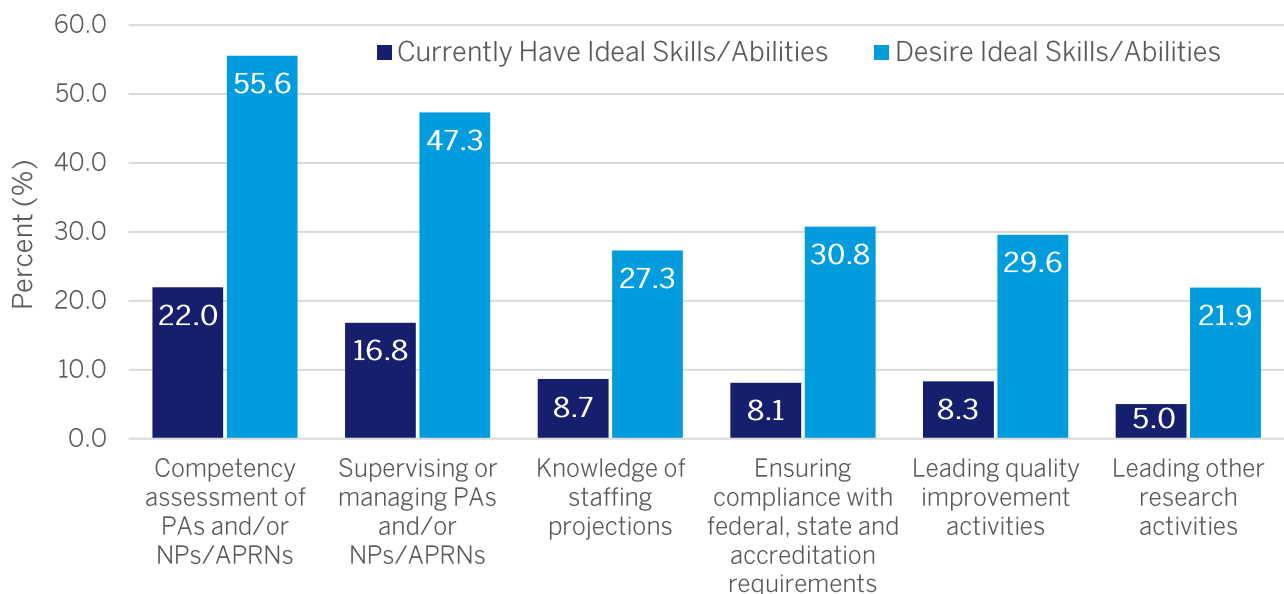
Fostering the Next Generation of PA Leaders

Approximately 66% of PAs agree or strongly agree that they currently possess the credentials and/or skills necessary to serve in a leadership position (Table 14). However, only a third of PAs (36.7%) have a career ladder for PA advancement at their primary employer despite almost half (48.0%) having a formal leadership structure within their organization. PAs were also somewhat likely to have internal leadership training opportunities (46.9%) and professional development funds available for professional development related to leadership (52.9%, Table 15). To determine which opportunities for training would interest PAs, we also asked about their current and desired level of skills and/or abilities along six different dimensions of leadership: performing competency assessments of PAs/NPs/APRNs, supervising or managing PAs/NPs/APRNs, knowledge of staffing projections, ensuring regulatory and accreditation compliance, leading quality improvement activities, and leading other research activities.

48%
of PAs currently have a formal leadership structure at their employer

Among these aspects of leadership, a majority of PAs desired to reach their ideal potential in performing competency assessments of PAs and/or NPs/APRNs (55.6%). However, only two in 10 PAs (22.0%) believed they had achieved their ideal level of training related to performing these assessments (Table 16, Figure 5).

Figure 5. Percent of PAs who Currently Possess/Desire to Have Ideal Skills and/or Abilities on Leadership Tasks, by Task



Additional areas of training interest were supervising or managing PAs and/or NPs/APRNs and leading quality improvement activities. Almost 2 in 3 PAs (66.5%) desired

achieving ideal, or close to ideal, supervisory skills and abilities while more than half (51.6%) desired a similar level of training on performing quality improvement. However, there were some areas of leadership where PAs were less interested in skill development. Notably, PAs found expanding their skills in staffing projections (25.8%), leading research activities that were not related to quality improvement (25.8%), and ensuring regulatory compliance (23.4%) to be less desirable (Table 16). These valuations may be related to a PA's desire to obtain leadership skills while continuing to perform tasks related to their primary role as clinicians, as opposed to moving into administrative positions. Future studies on PA leaders should explore this interaction between planned career trajectory and interest in specific leadership professional development topics.

Conclusion

We found three broad pathways taken by many PAs on their road towards leadership opportunities. Some PAs come into a leadership position serendipitously, being offered a position in response to their experience and current demands of the organizational environment. Many receive additional training from their employers, additional degrees, or military experience to grow into leadership. Others ambitiously aim to create their own leadership position within their employer. Recognizing and developing educational opportunities around these roads to leadership can help efforts to foster the next generation of PA leaders. Many PAs were looking to build their skills in performing competency assessments, supervising/managing other clinicians, and ensuring compliance with federal, state, and accreditation requirements. These responses reflect the diverse range of skills and abilities needed by PAs in leadership positions. While no single pathway can likely help PAs gain all of these skills, an important first step may be to increase PA awareness of the various approaches taken to become a leader. A second may be to ensure PAs are able to develop into leaders within their employers through established career ladders and opportunities for skill development. Less than half of the PAs in our sample had a formal leadership structure at their employer. As PAs continue to value leadership opportunities as part of their career trajectory, they may need to seek out employers with documented advancement and professional development opportunities.

Data Tables

Table 1. Leadership Role, by Type

Measure	N	Percent (%)
Yes, in a formal leadership role	615	16.6
Yes, in an informal leadership role	840	22.7
Not in the past year, but I am interested in one in the future	845	22.9
Not in the past year, but I have been in one in the past	304	8.2
No, and I am not interested	1,090	29.5
Total	3,694	100.0

Source: 2022 PA Practice Survey

Question: Are you in a leadership role at your primary employer, either formally or informally?

Table 2. Leadership Role by Career Experience

Career Experience	Formal leadership	Informal leadership	Interested in leadership	Not in, or interested in leadership
	Percent (%)			
0 to 1 year	0.5	1.6	9.3	3.9
2 to 4 years	8.1	18.4	35.3	20.3
5 to 9 years	20.7	24.5	28.9	22.9
10 to 14 years	22.0	16.9	13.9	15.8
15 to 19 years	18.4	14.3	4.9	12.4
20 or more years	30.4	24.3	7.7	24.7
Total (N)	615	838	841	1,391

Source: 2022 PA Practice Survey

Question: What year did you graduate from your PA program?

Question: Are you in a leadership role at your primary employer, either formally or informally?

Table 3. Percent of PAs Participating in Leadership Mentor Activities, by Activity

Measure	N	Not Interested	No, but Interested	Yes, in the Past	Yes, Currently
		Percent (%)			
I have/had a mentor who has supported me in my pursuit of, or work in, leadership	978	31.4	35.6	24.3	21.7
I have served, or am serving, as a mentor to others seeking, or in, leadership	972	24.5	38.3	13.4	23.9

Source: 2022 PA Practice Survey

Question: Please indicate your primary setting in which you practice as a PA.

Question: Are you in a leadership role at your primary employer, either formally or informally?



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Table 4. Percent of PAs Participating in Leadership Activities, by Activity

Measure	N	Not Participating	Informally Assigned	Formally Assigned
		Percent (%)		
Serving as a representative for PAs (or PAs and APRNs) to management	2,863	76.0	14.3	9.7
Serving as a mentor for PAs (or PAs and APRNs)	1,508	27.1	49.0	23.9
Help within onboarding for PAs (or PAs and APRNs)	1,424	19.0	45.9	35.1
Do other tasks outside what was assigned for role I was hired to do	2,851	58.5	27.0	14.5

Source: 2022 PA Practice Survey

Question: Please indicate your primary employer type.

Question: Are you in a leadership role at your primary employer, either formally or informally?

Table 5. Average Years of Experience for PAs in Leadership, by Experience Type

Measure Years	Formal Leaders		Informal Leaders		Not in, but Interested		Previously in Leadership		Not Interested in Leadership	
	N	Mean	N	Mean	N	Mean	N	Mean	N	Mean
Worked in administration	608	4	820	1	827	0	296	2	1,065	0
Worked clinically	614	15	830	13	839	7	301	17	1,078	11
Worked in PA education	604	5	824	2	831	1	297	3	1,063	1
Worked at your primary employer	612	9	829	7	837	4	301	8	1,073	6
Worked in current specialty	612	11	827	9	837	5	301	11	1,074	8
Served as a leader*	120	6	182	6	193	0	62	6	263	1
Overall Experience	615	16	838	13	841	7	303	18	1,088	12

Source: 2022 PA Practice Survey

Question: How many years have you...

*Note: This question only appeared in the November 2022 fielding of the PA Practice Survey



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Table 6. PAs Initial and Current Interest in Leadership Positions Offered by their Primary Employer

Measure	Initially Interested in Offered Leadership Position		Still Interested in Same Leadership Position	
	N	Percent (%)	N	Percent (%)
Strongly agree	108	29.8	91	30.4
Agree	151	41.7	139	46.5
Neither agree nor disagree	80	22.1	52	17.4
Disagree	17	4.7	10	3.3
Strongly disagree	6	1.7	7	2.3
Total	362	100.0	299	100.0

Source: 2022 PA Practice Survey

Question: How much do you agree with the following statements? When the opportunity was first presented, I was interested in moving into my current leadership role; I am still interested in my current leadership role.

Table 7. Percent of PAs with Government Service, by Type (2021)

Measure	N	Percent (%)
Never served in the military	2,235	90.7
Only previously on active duty for training in the Reserves or National Guard	30	1.2
Currently on active duty	23	0.9
On active duty in the past, but not now	171	6.9
Part of uniformed services, nonmilitary	6	0.2
Total	2,465	100.0

Source: 2021 AAPA PA Practice Survey.

Question: Have you ever served on active duty in the U.S. Armed Forces, Reserves, National Guard, or Uniformed Health Services?

Table 8. Percent of PAs in Leadership, by Government Service (2021)

Measure	N	Percent (%)
Never served in the military		
Not in Leadership	1,316	58.9
Informal Leadership	576	25.8
Formal Leadership	343	15.3
Served (currently or previously)		
Not in Leadership	113	49.1
Informal Leadership	56	24.3
Formal Leadership	61	26.5
Total		
Not in Leadership	1,429	58.0
Informal Leadership	632	25.6
Formal Leadership	404	16.4

Source: 2021 AAPA PA Practice Survey.

Question: Have you ever served on active duty in the U.S. Armed Forces, Reserves, National Guard, or Uniformed Health Services?

Question: Are you in a leadership role, either formally or informally?

Table 9. PAs Perceptions of the Organization’s Leadership Development Priorities

Measure	N	Percent (%)
I receive enough support and/or training to grow into leadership at my current employer		
Strongly agree	33	5.3
Agree	154	24.7
Neither agree nor disagree	205	32.9
Disagree	168	27.0
Strongly disagree	63	10.1
Total		
	623	100.0
Learning and development efforts for leaders are aligned with my current employer's strategic goals and priorities		
Strongly agree	25	4.0
Agree	142	23.0
Neither agree nor disagree	213	34.5
Disagree	166	26.9
Strongly disagree	72	11.7
Total		
	618	100.0

Source: 2022 PA Practice Survey

Question: Rate your agreement with the following statements

Table 10. Source of PA Formal Leadership Training

Measure	N	Percent (%)
My PA program	8	7.8
My doctoral degree program	19	18.6
Another degree program	21	20.6
A certificate program	20	19.6
My employer (past or current)	46	45.1
Conferences	24	23.5
Other	23	22.5
Total	102	100.0

Source: 2022 PA Practice Survey

Question: Where did you receive your formal leadership training?

Note: Question only available in the November 2022 PA Practice Survey to PAs who indicated they received formal leadership training in 2022.

Table 11. Percent of PAs who Have or Intend to Pursue a Masters/Doctorate Degree, by Leadership Role

Leadership Role	Have or intend to pursue a...			
	Non-PA master's degree		Doctoral degree	
	N	Percent (%)	N	Percent (%)
Formal Leaders	168	27.3	204	33.2
Informal Leaders	210	25.1	163	19.5
Interested in Leadership	170	20.2	153	18.2
Former Leaders	92	30.4	49	16.2
Not interested in Leadership	178	16.4	66	6.1
Total	818	100.0	635	100.0

Source: 2022 PA Practice Survey

Question: Do you have, or intent to pursue, a non-PA Master/Doctorates at some time in the future

Table 12. Additional Master/Doctorate Degrees PAs Planned to Pursue

Degree	N	Percent (%)
DMS(c)	227	44.4
MBA	96	18.8
MPH	82	16.0
PhD	67	13.1
DHS(c)	52	10.2
EdD	31	6.1
MD or DO	21	4.1
JD	10	2.0
Other master's degree	63	12.3
Other doctoral degree	29	5.7
Total	678	100.0

Source: 2022 PA Practice Survey

Question: Outside of your PA program what additional advanced degree(s) do you plan to pursue?

Note: PAs were able to select all degrees they planned to pursue, totals do not equal 100%.

Table 13. Percent of PAs who Believe there are Leadership Positions Available at their Current Employer

Measure	N	Percent (%)
Strongly agree	29	4.7
Agree	129	20.8
Neither agree nor disagree	126	20.3
Disagree	231	37.2
Strongly disagree	106	17.1
Total	621	100.0

Source: 2022 PA Practice Survey

Question: Please rate your agreement with the following statement: There are leadership positions available at my primary employer.

Table 14. PAs Perception of Whether they Currently Possess the Credentials and/or Skills Necessary to Serve in a Leadership Position

Measure	N	Percent (%)
Strongly agree	136	21.8
Agree	275	44.1
Neither agree nor disagree	146	23.4
Disagree	55	8.8
Strongly disagree	11	1.8
Total	623	100.0

Source: 2022 PA Practice Survey

Question: Please rate your agreement with the following statements: I currently possess the credentials and/or skills necessary to serve in a leadership position

Table 15. Career Advancement Resources Available to PAs at their Primary Employer, by Resource

Measure	N	Percent (%)
A career ladder	159	36.7
Formal PA leadership structure/organizational model	208	48.0
Internal leadership training	203	46.9
Protected time for leadership and management activities	186	43.0
Professional development funds for leadership development	229	52.9
Total	433	100.0

Source: 2022 PA Practice Survey

Question: Does your primary employer provide any of the following, regardless of whether you have personally used them?

Table 16. Needs Assessment of PA's Current and Desired Leadership Skills/Abilities

Measure	Current Skills/Abilities		Desired Skills/Abilities	
	N	Percent (%)	N	Percent (%)
Competency assessment of PAs and/or NPs/APRNs				
No skill or abilities	51	9.3	43	7.8
1	31	5.6	13	2.4
2	31	5.6	11	2.0
3	130	23.6	61	11.1
4	187	33.9	116	21.1
Ideal skill or abilities	121	22.0	305	55.6
Supervising or managing PAs and/or NPs/APRNs				
No skill or abilities	70	12.8	63	11.5
1	38	6.9	22	4.0
2	59	10.8	16	2.9
3	143	26.1	82	15.0
4	145	26.5	105	19.2
Ideal skill or abilities	92	16.8	259	47.3
Knowledge of staffing projections				
No skill or abilities	177	32.7	140	25.8
1	53	9.8	24	4.4
2	84	15.5	40	7.4
3	104	19.2	102	18.8
4	77	14.2	88	16.2
Ideal skill or abilities	47	8.7	148	27.3
Ensuring compliance with federal, state and accreditation requirements				
No skill or abilities	136	25.0	127	23.4
1	75	13.8	37	6.8
2	93	17.1	41	7.6
3	112	20.6	82	15.1
4	83	15.3	89	16.4
Ideal skill or abilities	44	8.1	167	30.8
Leading quality improvement activities				
No skill or abilities	129	23.8	92	17.0
1	59	10.9	33	6.1
2	81	15.0	42	7.8
3	130	24.0	95	17.6
4	97	17.9	119	22.0
Ideal skill or abilities	45	8.3	160	29.6
Leading other research activities				
No skill or abilities	190	35.3	139	25.8
1	89	16.5	54	10.0
2	71	13.2	35	6.5
3	102	19.0	106	19.7
4	59	11.0	86	16.0
Ideal skill or abilities	27	5.0	118	21.9

Source: 2022 PA Practice Survey

Question: Please rate your current and desired skills and abilities for the following tasks and competencies