Chapter 34

ROLE OF THE CIVILIAN PHYSICIAN ASSISTANT IN A MILITARY MEDICAL TREATMENT FACILITY

Christine C. Cabal, PA-C, MPAS

Introduction

The primary role of a civilian physician assistant (PA) in a military medical treatment facility (MTF) is to serve as a health care provider in the capacity they are credentialed in. Civilian PAs also provide continuity of operations and expertise when there are provider shortages and problems with patient access. Uniformed PAs often leave for deployments and field training exercises, resulting in understaffing in both tactical and clinical settings. Uniformed PAs also have a high turnover rate due to permanent change of station cycles, the expiration of term of service, or retirement. By filling valid authorizations and serving as augmentation, civilian PAs optimize the health and readiness of service members, the retired community, and their families, ultimately adding to the overall strength of the US Army. Civilian PA positions are filled by prior service military personnel as well as civilian trained personnel.

Mission

The Army civilian PA supports service members, retirees, and families during times of peace, conflict, and war. The Army Civilian Corps Creed is very similar to the Soldier's Creed. Army civilians share the same values and overall mission as the Army enlisted and officer personnel (Figure 34-1).

Army Civilian Corps Creed

I am an Army Civilian – a member of the Army Team. I am dedicated to our Army, our Soldiers and Civilians. I will always support the mission. I provide leadership, stability, and continuity during war and peace. I support and defend the Constitution of the United States and consider it an honor to serve our Nation and our Army. I live the Army values of Loyalty, Duty, Respect, Selfless Service, Honor, Integrity, and Personal Courage. I am an Army Civilian.¹



Figure 34-1. The Army Civilian Corps crest.

Supervision

The civilian PA is supervised by a physician, who ensures the practice remains within recognized medical standards. The PA is usually self-directed and has the autonomy to apply evidence-based clinical practice guidelines and engage patients actively in their health care. The extent and nature of supervision varies with the setting and patient problems.²

Duties and Responsibilities

Civilian PAs are responsible for the examination, diagnosis, and treatment of pediatric, adult, and geriatric populations within personal credentials and privileges delineated by the MTF. The civilian PA works collaboratively with a physician in patient evaluation, management, and creating an integrated plan of care that the patient understands and can comply with.²

Civilian PAs must be competent leaders to effectively manage others. They must possess fundamental capabilities such as understanding Army culture, developing a team, building trust, and supporting the commander. As an Army civilian PA, it is essential to have an understanding of Army culture, including terminology, customs, values, and ranks. Understanding customers is the key to delivering high-quality health service support. Civilian PAs need to know the MTF's organizational processes and procedures to manage expectations. Investing time and energy in learning the system produces better outcomes. MTFs follow high-reliability organization (HRO) principles that help develop and sustain the organizational objectives. The five principles of HRO are:

- 1. Sensitivity to operations.
- 2. Reluctance to simplify.
- 3. Preoccupation with avoiding failure.
- 4. Deference to expertise.
- 5. Commitment to resiliency.³

Civilian PAs have the opportunity to teach, coach, and mentor the next generation of PAs and medics. They can inspire, encourage, and develop a team of soldiers, health care professionals, leaders, and administrators (Figure 34-2). Trust is necessary to create a strong bond among Army professionals. A civilian PA must embrace team practice

US Army Physician Assistant Handbook

by not only focusing on their empanelment, but also striving to help other staff members. Expect to be another provider's surrogate due to high turnover. Expect to see Army, Air Force, Navy, and Marine patients, including reserve component and National Guard members. Civilian PAs must support the priorities, initiatives, and requirements of the MTF commander.



Figure 34-2. Mr. Andrew Flores precepts an Interservice Physician Assistant Program Phase 2 student, Officer Candidate Joshua Lane, at Evans Army Community Hospital Emergency Room in Fort Carson, Colorado.

Reproduced from: Troth JL. Evans trains future physician assistants. US Army website. Published January 19, 2016. Accessed May 15, 2020.

https://www.army.mil/article/161103/evans_trains_future_physician_assistants

Desired Skills and Attributes

The following skills and attributes are beneficial:

- Reviewing, documenting, and updating patient care through the electronic health record systems such as the Armed Forces Health Longitudinal Technology Application (AHLTA), Military Health System GENESIS, Composite Health Care System, and Essentris.
- Appropriately completing DD Form 689, Individual Sick Slip, or DA Form 3349, e-Profile (if applicable), to communicate to the chain of command patients' physical limitations to prevent further harm.
- Navigating through web-based applications for management of individual medical readiness such as the Army Medical Protection System (MEDPROS), the Air Force Aeromedical Services Information Management System (ASIMS), and the Navy Medical Event Reporting (MER) system.
- Being an ideal team player by having a strong work ethic and by motivating other staff members to do the same.
- Initiative and innovative thinking to improve policies, processes, and practices.
- Demonstrating flexibility by maintaining productivity, quality of work, and morale while adapting to changing conditions or unexpected obstacles.
- Providing excellent customer service through active listening, spoken and email communication, and telephone etiquette.
- Communicating effectively, both orally and in writing, and providing consultation, teaching, and coordination with patients and their family members regarding medical care. Establishing ongoing information exchange with leaders and subordinates promotes individual and organizational transparency in all actions and decision making.

Education and Training

A civilian PA must graduate from an accredited PA program, become certified by passing the Physician Assistant National Certifying Examination (PANCE), and maintain certification through the National Commission on Certification of Physician Assistants (NCCPA) by (a) taking a recertification exam every 10 years, (b) earning 100 continuing medical education (CME) credits every 2 years, and (c) paying a

certification maintenance fee every 2 years. Civilian PAs utilize the three training domains of the Army leader development model: operational, institutional, and self-development.⁴

Operational Training

Civilians gain experience from operational assignments at current positions, different organizational levels, specialty areas, and various geographical sites. The operational training environment will challenge Army civilians to excel in positions of higher responsibility. The Defense Health Agency (DHA) incorporates standardized medical trauma training to support current initiatives, such as tactical combat casualty care (TCCC) and prolonged field care. In the operational setting, TCCC prioritizes triage, treatment, and management of the most common preventable deaths resulting from combat.^{5,6}

Institutional Training

- Army civilians complete Civilian Education System (CES) courses by registering through the Civilian Human Resources Training Application (CHRTAS), a portal of the Army Training Requirements and Resources System (ATRRS). CES includes five levels of courses to provide leadership education for Army civilians throughout their careers, depending on their general schedule (GS) grades⁷:
- Foundation Course (level 1) for GS 1–15.
- Basic Course (level 2) for GS 1–9.
- Intermediate Course (level 3) for GS 10–12.
- Advanced Course (level 4) for GS 13–15.
- Continuing Education for Senior Leaders (level 5) for GS 14 and 15.

Self-Development Training

Civilian PAs must maintain knowledge of changing treatment protocols and procedures; self-development is their own responsibility. There are many ways to strengthen competencies to maintain or improve performance. These include but are not limited to the following:

- professional reading or self-study;
- attending conferences or seminars (web-based training, classroom training, or international events);
- independent research;
- community leadership positions that support development goals;
- individual study or practice;
- volunteer opportunities (search and rescue, medical volunteer abroad);
- off-duty academic schooling to acquire an advanced degree;
- earning certifications (fellowship in wilderness medicine, diploma in mountain medicine, tactical emergency casualty care);
- mentoring or being mentored; and
- professional mobility—civilian PAs can often change specialties and receive on-the-job training.²

Performance Management

Army civilians create an individual development plan (IDP) to outline development objectives, training opportunities, and career goals. Army civilians can refer to the Army Career Tracker for specific professional developmental models with key assignment lists.⁸ The IDP is an instrument to help project a professional path and establish a timetable to achieve short-term and long-term career goals. The IDP should be completed annually in conjunction with the annual performance plan. Just as uniformed PAs have the officer evaluation report (OER) to monitor career progression, civilian PAs use the Department of Defense Performance Management and Appraisal Program (DPMAP) to discuss performance expectations with supervisors. Performance management helps civilians grow into competent leaders who can potentially advance to higher levels of personal fulfillment and professional achievement.⁹⁻¹¹

Sample IDP

Short-Term Goal (1-Year Plan)

- CES Foundation Course no later than 90 days after in-processing.
- Attend Emergency Medicine Boot Camp.
- Listen to monthly EM:Rap videos.

- Read 1 professional book per month.
- Self-study.
- Conduct team briefings/group presentations.

Long-Term Goal (5-Year Plan)

- CES Intermediate Course (distance learning and resident instruction).
- Take college or university classes.
- Participate in professional organizations (NCCPA, Wilderness Medical Society).
- Perform volunteer work (search and rescue, Army Ten Miler).
- Networking.

Sample DPMAP Performance Element and Standards for a Civilian PA

- **Objective 1:** Meet Medical Command (MEDCOM) efficiency standards for a PA in a community hospital setting.
- Standard: Achieve a combined 75% of established MEDCOM standards for Joint Outpatient Experience Survey (JOES), relative value unit (RVU), and Practice Management Revenue Model (PMRM) values.
- **Objective 2:** Maintain current licensure, CME benchmarks, and required certifications.
- Standard: Maintain current and active NCCPA licensure.
- **Standard:** Earn the required 100 hours per 2 years of CME to maintain current NCCPA licensure.
- **Standard:** Maintain current certification in Basic Life Support (BLS), Advanced Life Support (ALS), and Pediatric Advanced Life Support (PALS) disciplines.
- **Objective 3:** Train students across multiple disciplines in emergency medicine.
- **Standard:** Work with PA students, nurse practitioner students, medical students, and student medics to ensure at least 80% pass rate for emergency department rotations in their respective fields.
- **Objective 4:** Complete charting and mandatory training in a timely manner.
- Standard: Work with emergency department coders to ensure 75% of patient encounter charts are completed during initial patient encounter.

- **Standard:** Maintain 75% currency of mandatory Swank Health Training, both online and face to face.
- **Objective 5:** Complete assigned additional duties.
- **Standard:** Complete assigned additional duties as designated to meet 75% of suspense dates established by the department chief or appropriate committee chair.¹⁰

Continuing to Serve

Civilian PAs with a military background have the advantage of familiarity with policies and procedures that enable them to excel in the MTF environment. They have unique skill sets in operational medicine and staff briefings that allow them to relate to most of the patient population and have confidence in delivering high-quality health care regardless of the circumstances. Expertise gained through military training and remote conditions allows these PAs to practice medicine by using effective communication, leading by example, and being highly adaptable in constantly changing situations.

Many prior armed forces personnel hang up their uniform before military retirement but continue to serve the country by becoming civilian employees in the federal government. Those who performed honorable active military service have additional benefits under the Federal Employees Retirement System (FERS). To allow creditable military service to be used toward retirement eligibility, for example, GS employees can make military service deposit (MSD) payments to their civilian retirement fund prior to separation from federal employment. The MSD amount is a sum equal to 3% of military basic pay during the period of military service, plus interest (which starts accruing after 2 years of federal employment). The deposit may be paid to the Defense Finance and Accounting Service in a lump sum or through payroll deduction. Those who are eligible can also apply their active duty service time toward both Guard and Reserve retirement and FERS retirement.¹²

Lessons Learned

The following are lessons learned for civilian PAs:

• A team is only as strong as its weakest link. Identify deficiencies in the organization and focus on improving these shortfalls to enhance staff

US Army Physician Assistant Handbook

motivation and work ethic. Common operational problems include interpersonal conflict, stress, lack of motivation, poor teamwork, lack of trust, lack of accountability, and poor communication.

• Medics and nurses should be extensions of the civilian PA's capabilities. The more competent the health care staff, the more efficient the PA will become as a member of a cohesive team. Leaders have the ability to influence people, and that's one of the keys to success (Figure 34-3).



Figure 34-3. Mr. Arne E. Oas teaches bedside ultrasound techniques on a simulated patient (Sergeant Jason Williams) as a physician assistant student, Officer Candidate Daniel W. Matthes, learns how to conduct a focused assessment with sonography in trauma (FAST) exam. Photograph courtesy of Christine C. Cabal.

• Learn to humanize medicine. See patients as people and not as objects. The PA must treat patients as if they are their own family. Recognize that no one likes to go to the hospital. Patients are there to get help from the PA and their staff. Some may require more education than others; therefore, part of the job is having patience with patients. The PA will never know if that "chronic knee pain" is a superficial reason for a rape victim to seek help. The PA will never know when that "STD check" is actually testicular cancer in a 21-year-old soldier. The PA is going to come into contact with people who are at their absolute breaking point in their MTF. If patients are angry and have an attitude, the PA should not take it personally (this may be the saddest, most stressful, loneliest time for that patient). The PA has the privilege of being able to take care of the nation's finest soldiers, families, and civilians. The PA must take care of them like they were their own.

Tips for Success

Along with lessons learned, these tips for success will help future civilian PAs succeed beyond expectations:

- Focus on outcomes. Develop a strategy for the team and the overall health care system to meet desired results with measurable targets and standards. When there is a goal in mind, it is easy to know which priorities and initiatives to support. Consistently holding others accountable to a high standard (as opposed to waiting for the annual evaluation) raises the performance level of each team member. Ultimately, organizations and team members without growth and purpose do not flourish and have low job satisfaction.
- Do not strive to make everyone happy. Some patients or customers will disapprove of their plan of care (eg, they cannot get the magnetic resonance imaging they want or the pain medication they prefer). All the PA has to do is ask themselves, "Did I meet the standard of care?" If the answer is "YES," do not lose sleep over the negative interactive customer evaluation comments and move on. If the answer is "NO," then conduct a self after-action review and determine how the PA can make the situation better next time, learn from it, and then move on.
- The PA is in charge of their career and life goals. Maintain discipline to consistently work for professional and personal growth. Attend

seminars, read journals, and use podcasts. Most importantly, the PA must take care of themselves (not just their physical fitness, but also their emotional, spiritual, social, and family fitness).

Conclusion

The civilian PA contributes tremendously to the MTF by providing highquality care to service members, the retired community, and their families. They serve as teachers and mentors to medics, as an augmentation to uniformed providers on tactical missions, and as leaders who inspire devotion and hard work. Civilian PAs enhance the overall readiness of the armed forces through effective leadership, skilled management of expectations, continuous learning, and embracement of team practice.

References

- 1. Department of the Army. Army Civilian Corps Creed. Accessed May 15, 2020. https://www.army.mil/values/corps.html
- Civilian Personnel On-Line (CPOL) portal. Accessed May 15, 2020. https://acpol.army.mil/
- Weick K, and Sutcliffe K. Managing the Unexpected: Sustained Performance in a Complex World. 3rd ed. John Wiley & Sons; 2015.
- US Army Combined Arm Center. Army Leader Development Strategy. DA; 2013. Accessed May 11, 2020. https://Usacac. army.mil/Sites/Default/Files/Documents/Cal/Alds5june%20 202013Records.Pdf
- 5. US Department of Defense. *Medical Readiness Training (MRT)*. DOD; 2018. DOD Instruction 1332.24.
- 6. US Department of Defense. *Joint Trauma System (JTS)*. DOD; 2016. DOD Instruction 6040.47.
- 7. US Department of the Army. *Army Training and Leader Development*. DA; 2017. Army Regulation 350-1, Subchap 4-3.
- 8. Army Career Tracker website. Accessed May 15, 2020. https://actnow.army.mil/

- 9. US Department of Defense. DOD Civilian Personnel Management System: Performance Management and Appraisal Program. DOD; 2016. DOD Instruction 1400.25, vol 431.
- DOD Performance Management and Appraisal Program (DPMAP) website. Accessed March 23, 2020. https://www. dcpas.osd.mil/LER/DPMAP
- 11. Office of Personnel Management (OPM) website. Accessed March 23, 2020. https://www.opm.gov
- US Office of Personnel Management. Federal Employees Retirement System (FERS) Transfer Handbook; a Guide to Making Your Decision. OPM; 2008: 7-13. Federal Personnel Manual Accessed May 15, 2020. https://www.opm.gov/ retirement-services/publications-form/pamphlets/ri90-3.pdf