

22 September 2025

Dear

ATISN 25089 – Physician Associates

Thank you for your request to Welsh Government for information under the Freedom of Information Act (2000) received on 25 August 2025. You requested the following:

1. Provide copies of any email correspondence (including attachments) between the Welsh Government and the General Medical Council between 15th July 2025 - 22nd August 2025 and contains the phrase "physician assistant" OR "leng review".

Our Response

Welsh Government holds information which fits the description of your request and the information is attached – see Document 1, 1a, 1b and 1c.

We have concluded that some of the information requested is exempt from disclosure under the following sections of the Freedom of Information Act:

- Section 40(2) – Personal Information of the Freedom of Information Act.

An explanation of our application of this exemption is set out at Annex 1 to this letter.

Next Steps

If you are dissatisfied with the Welsh Government's handling of your request, you can ask for an internal review within 40 working days of the date of this response. Requests for an internal review should be addressed to the Welsh Government's Freedom of Information Officer at:

Information Rights Unit
Welsh Government
Cathays Park
Cardiff
CF10 3NQ
or Email: Freedom.ofinformation@gov.wales

Please remember to quote the ATISN reference number above.

You also have the right to complain to the Information Commissioner. The Information Commissioner can be contacted at:

Information Commissioner's Office
Wycliffe House
Water Lane
Wilmslow
Cheshire
SK9 5AF

However, please note that the Commissioner will not normally investigate a complaint until it has been through our own internal review process.

Yours sincerely,

Freedom of Information Act 2000: Section 40(2) Personal information about others

Section 40(2) together with the conditions in section 40(3)(a)(i) or 40(3)(b) provides an absolute exemption if disclosure of the personal data would breach any of the data protection principles.

‘Personal data’ is defined in sections 3(2) and (3) of the Data Protection Act 1998 (‘the DPA 2018’) and means any information relating to an identified or identifiable living individual. An identifiable living individual is one who can be identified, directly or indirectly, in particular by reference to an identifier such as a name, an identification number, location data, an online identifier or to one or more factors specific to the physical, physiological, genetic, mental, economic, cultural or social identity of the individual.

We have concluded that, in this instance, the information caught by your request contains third party personal data.

Under Section 40(2) of the FOIA, personal data is exempt from release if disclosure would breach one of the data protection principles set out in Article 5 of the GDPR. We consider the principle being most relevant in this instance as being the first. This states that personal data must be:

“processed lawfully, fairly and in a transparent manner in relation to the data subject”

The lawful basis that is most relevant in relation to a request for information under the FOIA is Article 6(1)(f). This states:

“processing is necessary for the purposes of the legitimate interests pursued by the controller or by a third party except where such interests are overridden by the interests or fundamental rights and freedoms of the data subject which require protection of personal data, in particular where the data subject is a child”.

In considering the application of Article 6(1)(f) in the context of a request for information under FOIA it is necessary to consider the following three-part test:

- **The Legitimate interest test:** Whether a legitimate interest is being pursued in the request for information.
- **The Necessity test:** Whether disclosure of the information/confirmation or denial that it is held is necessary to meet the legitimate interest in question.
- **The Balancing test:** Whether the above interests override the interests, fundamental rights and freedoms of the data subject.

Our consideration of these tests is set out below:

1. Legitimate interests

Your request includes emails which were caught by your request. I have not identified any legitimate interest that you may have in knowing the identities of those individuals named within the information.

2. Is disclosure necessary?

We do not believe disclosure of the identities of those involved would allow any greater understanding of the content of the information.

3. The balance between legitimate interests and the data subject's interests or fundamental rights and freedoms

As we do not believe disclosure of this personal data is necessary, there is no requirement on us to undertake a test to balance the legitimate interests against the right of individuals, as the fundamental rights and freedoms provided by the DPA are not being challenged.

I have concluded that there is a reasonable expectation that the identity of the living individuals named in the information would not be made public. It is my view, therefore, that disclosure of the redacted information would breach the first data protection principle and thus is exempt from release under section 40 of the FOI Act.

Doc 1

From: [Redacted s40(2)]@gmc-uk.org

Sent: 22 August 2025 16:01

To: [Redacted s40(2)] (HSCEY - Directorate of Health Policy) [Redacted s40(2)]@gov.wales>; [Redacted s40(2)] (HSCEY - Workforce & Corp. Business Directorate) <[Redacted s40(2)]@gov.wales>

Cc: [Redacted s40(2)] (HEIW) <[Redacted s40(2)]@wales.nhs.uk>; [Redacted s40(2)] (HEIW) <: [Redacted s40(2)]@wales.nhs.uk>; : [Redacted s40(2)] (HSCEY - Workforce & Corp. Business Directorate) <[Redacted s40(2)]@gov.wales>; [Redacted s40(2)]<:[Redacted s40(2)]@gmc-uk.org>

Subject: Update on our response to the Leng review

Dear [Redacted s40(2)] and [Redacted s40(2)],

Please find attached a letter from the GMC's Chief Executive, [Redacted s40(2)], to update you on the steps we're taking as a UK-wide regulator in response to Professor Leng's review into the physician associate and anaesthesia associate professions in England. I also attach the corresponding letter that [Redacted s40(2)] has sent to [Redacted s40(2)], Director of Workforce at DHSC, and the message we plan to send to PA and AA registrants next week.

We will not be publishing the letter on our website and would appreciate if it was not shared more widely.

We are grateful for the engagement that various GMC colleagues have had with Welsh Government and HEIW since the publication of Professor Leng's review. We look forward to continuing to work with you on this and where appropriate supporting the response in Wales, including through the MAPs Oversight Group.

Best wishes,

[Redacted s40(2)]

[Redacted s40(2)]

Policy and External Affairs Manager | Rheolwr Polisi a Materion Allanol

General Medical Council | Cyngor Meddygol Cyffredinol

Email | Epost: [Redacted s40(2)]

www.gmc-uk.org

Doc 1a

From the Chief Executive and Registrar
General Medical Council
Regents Place
350 Euston Road
London NW1 3JN
Email: [Redacted s40(2)]
Telephone: [Redacted s40(2)]
gmc-uk.org
Chair
[Redacted s40(2)]
Chief Executive and registrar
[Redacted s40(2)]

22 August 2025

[Redacted s40(2)]
Chief Medical Officer Directorate of Public Health
Welsh Government
Cathays Park
Cardiff
CN10 3NQ

Dear [Redacted s40(2)],

I am writing to update you on the steps we're taking as a UK-wide regulator, in response to the recent publication of Professor Leng's review into the physician associate and anaesthesia associate professions in England.

As I said in my initial response to the review, we are looking forward to working on aspects of the report that are for us, and with others where there is a shared responsibility to deliver change. We are now considering the review's findings and recommendations for us in detail. As ever, we will continue to put patient safety at the heart of our decision making and we will keep our registrants informed of any action we take as a result.

To help inform our approach, it would be helpful to understand your own position on the review and its implications for your country's workforce, should you choose to take forward some or all of the recommendations at a system level.

While Professor Leng's review was specific to England, as a regulator with responsibilities across England, Northern Ireland, Scotland and Wales, we urge governments and health services across all four countries of the UK, to work together to ensure as much consistency as possible at a UK wide level.

We have also written to the Department of Health and Social Care in these terms, which I attach to this correspondence for your information.

For our part, we stand ready to join conversations at a system level to support coordination of next steps. However, we are aware that ongoing legal processes may affect planning in the immediate gmc-uk.org 2 period ahead. During this time, we will continue to consider Professor Leng's recommendations for us, in particular:

- We will assess what updates we could make to terminology in our public facing content in advance of formal legislative change of the physician associate and anaesthesia associate

titles. As a UK-wide regulator, we will urge as much consistency as possible across the four UK countries, for the benefit of patients, registrants and the wider healthcare system.

- We will look at how information is presented on our website and associated materials, to reinforce the commitment we've already made to recognise and regulate our registrants' distinct professions. In doing this work we'll ensure our content is accessible and clear for users of our website, including patients and members of the public and all our registrants.
- We will continue to work with education and training providers and royal colleges as we fulfil our regulatory responsibilities set out in the Anaesthesia Associates and Physician Associates Order: to set the outcomes and standards that students qualifying from physician associate and anaesthesia associate courses must meet to join our register; and approve the curricula that courses must deliver.

Working together

We urge governments and health services across all four countries of the UK, to work together on the outcome of the Leng review for the benefit of patients. We also ask that you ensure that individuals whose roles are impacted by the review's findings are supported during this period of change.

We look forward to receiving an update your position on the review and its implications for Wales. If you have any questions or would like to discuss this further, please don't hesitate to contact [Redacted s40(2)], Head of Wales at [Redacted s40(2)]@gmc-uk.org, who will be happy to help.

Yours sincerely
[Redacted s40(2)]

From the Chief Executive and Registrar
General Medical Council
Regents Place
350 Euston Road
London NW1 3JN
Email: [Redacted s40(2)]
Telephone: [Redacted s40(2)]
gmc-uk.org
Chair
[Redacted s40(2)]
Chief Executive and registrar
[Redacted s40(2)]

22 August 2025

[Redacted s40(2)]
Director of Workforce
Department of Health and Social Care

Dear [Redacted s40(2)],

Next steps: the independent review of the physician associate and anaesthesia associate professions in England

Following the recent publication of the independent review into the physician associate and anaesthesia associate professions in England, I am writing to seek an update on the department's implementation plan and coordination of next steps.

For our part, as I said in our initial response to the review, we are looking forward to working on aspects of the report that are for us and with others where there is a shared responsibility to deliver change.

We are now considering the review's findings and recommendations for us in detail. As ever, we will continue to put patient safety at the heart of our decision making and we will keep our registrants informed of any action we take. To help inform our approach, it would be particularly helpful to understand the department's intentions in two key areas:

UK-wide consistency

While Professor Leng's commission and report were specific to England, as a four-country regulator, we urge the department to ensure there is as much consistency as possible at a UK wide level going forward. This should apply to the overarching approach to implementation as well as the specifics of recommendations, including role titles for individual professionals, not least because any changes to protected titles via a section 60 Order would span the UK. Clarity and consistency for patients are vital.

To that end, I would be grateful for an update on the outcome of your engagement with governments and health services across Northern Ireland, Scotland and Wales on these matters. I have also written to our key partners in the devolved countries in similar terms, which I attach to this correspondence for your information.

Coordination of next steps

As the department has acknowledged, implementation of the recommendations will require organisations to work together. We stand ready to join conversations at a system level to support coordination of next steps. In the meantime, we are exploring the impact of the review's findings on our regulatory processes and materials. In doing so, we note NHS England's recent correspondence

to individual PAs and AAs and primary and secondary care employers and the publication of an FAQ document.

We also understand that the department will bring forward legislation, which subject to parliamentary approval - and agreement in the Scottish Parliament - will formally change the physician associate and anaesthesia associate titles to physician assistant and physician assistant in anaesthesia. When you are able, it would be helpful to receive further information about your timeline for these changes, as well as confirmation that physician assistants and physician assistants in anaesthesia, will require registration to work in these roles after 13th December 2026.

We are aware that ongoing legal processes may affect the department's planning in the immediate period ahead. During this time, we will continue to consider Professor Leng's recommendations for us, in particular:

- We will assess what updates we could make to terminology in our public facing content in advance of formal legislative change of the physician associate and anaesthesia associate titles. As a UK-wide regulator, we will urge as much consistency as possible across the four UK countries, for the benefit of patients, registrants and the wider healthcare system.
- We will look at how information is presented on our website and associated materials, to reinforce the commitment we've already made to recognise and regulate our registrants' distinct professions. In doing this, we'll ensure our content is accessible and clear for users of our website, including patients and members of the public and all our registrants.
- We will continue to work with education and training providers and royal colleges as we fulfil our regulatory responsibilities set out in the Anaesthesia Associates and Physician Associates Order: to set the outcomes and standards that students qualifying from physician associate and anaesthesia associate courses must meet to join our register; and approve the curricula that courses must deliver.

Working together

We urge governments and health services across all four countries of the UK, to work together on the outcome of the Leng review for the benefit of patients. We also ask that you ensure that individuals whose roles are impacted by the review's findings are supported during this period of change. We look forward to receiving an update on the department's implementation plan and your work to develop a fuller response to the review.

Best wishes

[Redacted s40(2)]

August 2025: message to PA / AA registrants

Subject line: A message from GMC Chief Executive, [Redacted s40(2)]

Preview line: Reflections on the Leng review

I wanted to write to you following the publication of Professor Gillian Leng's Independent review of the physician associate and anaesthesia associate professions in England.

I understand this is an uncertain time and appreciate the impact this may be having on you and your colleagues.

Professor Leng made a number of recommendations, including some for us as your regulator, which we and others across the healthcare system are now considering in detail. The Department of Health and Social Care has indicated that it will work collaboratively with relevant organisations to set out a clear plan in advance of publishing a fuller response to the review, and we stand ready to play our part in that. I'm afraid I can't give you answers to all the questions you may have while we are waiting for these conversations to start, but please be assured that we will write to you again when we have a clearer picture around next steps.

During this period, as a UK-wide regulator, we are particularly working to understand the views of all four UK governments. While the review was focused on England, we are urging consistency for patients, and everyone affected by the findings, across England, Northern Ireland, Scotland and Wales.

We also continue to meet with registrants across the UK to help improve understanding of our role and what it means to be a regulated professional. In some of our recent engagements we've been asked to confirm that all those who are registered with the GMC must continue to follow Good medical practice and all of our professional standards. So, I hope it is helpful to address this point here to support you in your own role and practice: this continues to be the case, irrespective of your role title or employment details.

We will keep in touch with you, via upcoming editions of GMC news. If you've any questions or concerns about your role title, job description or terms of employment, I encourage you to contact your supervisor and employer who will be best placed to advise you on your specific circumstances. With very best wishes and my thanks for your continued professionalism, skill and commitment to patient care.

[Redacted s40(2)]

Chief Executive

General Medical Council