



Reamer L. Bushardt, PharmD, PA-C, is Associate Professor and Director, Division of Physician Assistant Studies, Medical University of South Carolina, Charleston.

A call for physician assistants to make a ruckus—and a difference

I have been doing some thinking since President Obama made his call to physicians and nurses to lead primary care, leaving out physician assistants, during an address to Congress on health care reform. I thought some more when I read a *New York Times* article, “With doctors in short supply, responsibilities for nurses may expand.”¹ The author of the article defined PAs for her readers: “Physician assistants, another type of nonphysician provider, generally work for specialists rather than in primary care.” But this is not about the President, physicians, or nurses, because I support all of them. This is about us.

On a commuter flight to Philadelphia to attend a recent JAAPA editorial board meeting, I read *Tribes: We Need You to Lead Us*, by Seth Godin.² It was not particularly well-written, but I finished it in less than 2 hours and was completely charged by the end of the book. It made me

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think about our profession in a new way. Godin writes about leadership in a world that is being reshaped by global communications. He says “a tribe is a group of people connected to one another, connected to a leader, and connected to an idea.”² He then calls on all of us to be leaders; actually, *begs* is a bit more accurate.

Our profession epitomizes his tribe concept. Some might even call us a “clever” tribe because every one of us is highly trained, skilled, and talented.³ Talk to a PA for 5 minutes about health care and being a PA, and I bet a variation of one of these core values will surface: improving access to care, spending more time with patients so they understand their condition or treatment, or making a positive difference in the lives of our patients and community. This is not some well-constructed marketing campaign.

This is who we are; who we have always been. More importantly, America’s health care system needs us to be a guiding force.

Godin describes how the business world is now embracing and rewarding leaders that challenge the status quo. And these leaders are folks who make a ruckus. He points out that people are not really afraid of failure but rather of blame or criticism. This struck a chord with me. My parents did not raise me to be fearless but instead to live my life with integrity, abiding by a set of core values. I will admit that I am not unfamiliar with criticism. My mentors and friends keep it constructive. To those who are critical simply to be critical or quick to denounce innovation or creativity, I would recommend you share with them a long-standing Southern tradition: offer them a “bless your heart,” then forget about them.

As a profession, we are a nice group of people. We are patient, caring, and sensitive to other people’s opinions, especially physicians. Sometimes, I get the sense we are waiting on other people to give us permission to step up and change the face of health care. I agree with Godin: “Change isn’t made by asking permission. Change is made by asking forgiveness, later.”² If we continue to deliver excellent care, increase patient satisfaction, and help shape successful practices and institutions that patients seek out, then we continue to uphold our promise to our supervising physicians, and they will continue to support us. Think about it for a moment. If we succeed, won’t our supervising physicians succeed, too? We, however, need to be in charge of the future of our profession.

We are leaders in the lives of every patient we treat. This has developed, within each of us, all the skills we need to move our tribe to the forefront of our country’s health care reform plan. If we are there, then the patients will be there, too. I am asking you to make a ruckus. **JAAPA**

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