



Short title: Assistant for anaesthetist BP

1. Purpose of review

PS08(A) Position statement on the assistant for the anaesthetist was due for review having previously been reviewed in 2008. PS08(A) is frequently referenced, and referred to by training providers, service providers, administrators, assistants, and fellows. The current revision has aimed to clarify the scope of assistants, and the high-level core competencies expected. The revised document is intended to assist providers of training in producing curriculum frameworks for their training programs.

2. Background

The value of assistants to the anaesthetist as important members of the theatre team has long been recognised, and appreciated by anaesthetists. Assistants play a significant part in patient care and are a contributing factor to better patient outcomes.^{1,2}

The pathways to becoming assistants are varied. Consequently it is essential that training outcomes and competencies are standardised across Australia and New Zealand, irrespective of training pathway. Course providers need to be aware of the standard, to ensure that their graduates meet the standard.

3. Issues

As there was considerable interest from stakeholders, including the nursing profession, anaesthesia technicians, course providers, and fellows, the document development group (DDG) responsible for reviewing PS08(A), with the approval of ANZCA Council, convened an expert group seeking input and insight into the educational perspectives from each of the stakeholders. Nominations for the Expert Group were sought from nurse assistants, from anaesthesia technicians, and anaesthesia technicians with prior nursing training.

Unsolicited correspondence was received from the following organisations about core competencies:

- Australian Society of Anaesthesia Paramedical Officers (ASAPO)
- New Zealand Anaesthetic Technicians' Society (NZATS)
- Statewide Anaesthesia and Perioperative Care Clinical Network (SWAPNET)

Further material on core competencies was sought from organisations including:

- Auckland University of Technology Diploma in Applied Science: Anaesthetic Technology
- Medical Sciences Council of New Zealand

The aim of PS08(A) is to promote better training through identification of core competencies and skills. It is understood that the different pathways leading up to entry into training to become anaesthesia assistants involve different training rather than any difference in the duration of that training.

Suggestions regarding organisational compliance with PS08(A) was considered outside the scope of the document as ANZCA has no regulatory role.

Exposure to clinical experience was considered as an essential component of training. Such experience may be delivered either during or after completion of a course, however, the recommended twelve months of clinical experience should be completed prior to awarding the relevant certificate.

Safe handling of controlled/restricted drugs is a core competency and the DDG recognises that rules around handling of drugs vary between states and territories. While ANZCA supports that all anaesthesia assistants should be trained to this standard the matter of regulations is beyond the scope of PS08(A).

With regard to invasive techniques the DDG acknowledged that insertion of intercostal drain tubes is not uncommon, while pulmonary artery catheter insertion may be less common outside of cardiothoracic anaesthesia. A significant number of anaesthetics are administered outside large tertiary hospitals where intercostal tubes may be rare. It was regarded that intercostal tubes should be included given the risks and potential complications.

Discussion among the expert group and the document development group resulted in the following recommendations:

- 3.1 There was strong support for all assistants being registered practitioners with the relevant regulatory authority. In Australia, AHPRA's moratorium on new applications for registration under health practitioners has delayed the ability of some assistants to become recognised as registered health practitioners. Nevertheless, ANZCA supports the notion that all assistants should be regulated by the relevant authority, as it is in New Zealand.
- 3.2 Ideally the anaesthesia assistant should have basic pharmacology knowledge and be able to check controlled and restricted drugs and assist the anaesthetist in the safe handling of these drugs in the anaesthetic environment. Such activity must comply with the laws of the relevant jurisdictional authorities in each country.
- 3.3 PS08(A) should be built around a core set of competencies for all assistants to the anaesthetist. The focus of PS08(A) should be on the core competencies that curricula should aim to achieve rather than specifying particular curriculum areas. A prescriptive curriculum framework may preclude particular approaches that are already in use.
- 3.4 Assistants, who work in specialised and/or limited scopes of practice are required to attain, demonstrate and maintain the core set of competencies and any additional skills as necessary.
- 3.5 The objective of demonstrating and assessing core competencies, and the requirement for ongoing maintenance of competence should allow flexibility in training courses while maintaining the standard recommended by ANZCA.
- 3.6 Specifying course duration was not supported as the time taken to achieve core competencies may vary. It is achieving the competencies that is fundamental, rather than time spent in training. However, it was recommended that academic attainment of competencies should be separate from clinical experience, which should be for a minimum duration of twelve months as an anaesthesia assistant.
- 3.7 Recognition of prior learning should not be included as this is the role of the educational institution in determining entry criteria and is beyond the scope of PS08(A).
- 3.8 All parties agreed that all assistants should undertake continuing professional development (CPD). While CPD is mandatory for regulated practitioners it is essential that all anaesthesia assistants undertake CPD and that it is relevant to the scope of practice. CPD activities could include in-service sessions in facilities where these are available, advanced life support (ALS) courses, and any available online resources that may be available for CPD purposes.

4. Summary

The current revision has considered the anaesthesia assistant in the context of a valued member of the anaesthesia team. This has formed the basis for identifying the high-level competencies, which are aimed at guiding course providers. PS08(A) is not intended to be prescriptive but rather allow flexibility given the varying backgrounds of assistants.

The core competencies listed in the document are the ones ANZCA regards as essential and recommends that they be included in the framework for curricula designed to train assistants to the anaesthetist.

5. Process of document review

The document development group comprised:

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1. Weller J, Merry A, Robinson B, Warman G, Janssen A. The impact of trained assistance on error rates in anaesthesia: a simulation-based randomized controlled trial. *Anaesthesia* 2008; 64: 126-130.
2. Kluger M, Bukofzer M, Bullock M. Anaesthetic assistants: their role in the development and resolution of anaesthetic incidents. *Anaesthesia and Intensive Care* 1999; 27: 269-274.

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