

NZATS Northern Regional meeting 7th November 2008

Present: Matthew Lawrence, Ian Boxsell, Kaylene Henderson, Nicola Smith-Guerin, Louise Morgan, Kylie Parry, Heather Godfrey, Terry Leftley, Amanda Hodson, Paul Woods, Michelle Peck, Sian Mitchell, Natalie Forster, Mike Powell, Jonn Yardley-Jones, Tony Prangnell, Zoe Catt, Brett Besley, George Fuge.
Tori from Intermed

Apologies: Lisa Clark, Colin Spence, Vinnie Neva, Helen Nati, Lillian Nati, Lee Pederson, Morgania Potter, Lyn Body, Sonya Black, Andy Hipkiss,

Meeting open 1915

Kylie Parry: HPCA – how they will monitor CPD (continual professional development)

Includes: CPR/Fire
Maori Health
i-STAT / haemocue
Allied Health Template
No essays
Requirement for recording hours of CPD
How to achieve template
Update 3 yearly, undetermined hrs per year

Q's: Matt - Who checks?

A: Local Manager/hospital checks before sending to HPCA board

This is work in progress and will be travelling nationwide to regional meetings, and possibly having a live on-line document with national consolidation.

NZATS executive will endeavour to attend meetings to collate ideas

Could all queries in this matter be directed to Kylie at professional-development@nzats.co.nz

Sian Mitchell: AUT Update:

Both HAP papers now combined into one paper (1st Semester/Year 2). Detail only slightly less - paper content deemed to be appropriate for technician's requirements at present. The gap left by HAP 1B in Semester 2 has given us an opportunity to write a new paper which addresses *some* gaps in our training. NZATS recognise that some technicians registered with the society are currently performing aspects of circulating and recovery roles in some hospitals. The society wishes to ensure all our members are informed if they are being given these responsibilities and that we begin to address these training issues in a structured format. This was debated at Conference this year, and during our AGM and it was agreed that this was a positive step forward.

Contribution from the floor at the Regional Meeting included a suggestion that we have a pharmacology paper in the training programme (*on follow up with AUT, not an option whilst we are under Faculty of Applied Science as pharmacology is a Health Sciences paper*). Similarly there was a suggestion to give up the biophysics paper and include main principles with Anaesthesia II - equipment paper (*on follow up with AUT this is not possible at present as AUT require that our course includes TWO Applied Science papers so the HAP and biophysics meet this requirement*). NZATS are perusing other options and will communicate this to the members in due course.

There were also excellent suggestions regarding where the new paper should fit into the training scheme and this has been taken into account in the planning.

Nicola Smith-Guerin: exam update

OSCE time increased to 7 minutes

The Traditional machine check has now been removed from the registration exam and has been replaced with up to 5 OSCE stations with a focus on checking and understanding the machine

5 OSCE Stations

*** **What is an OSCE?** ***

The Objective Structured Clinical Exam (OSCE) is a performance-based exam. During the exam, trainees are observed and evaluated as they go through a series of stations where they interview, examine and treat standardized patients presenting with some type of problem.

An OSCE is:

- objective, because examiners use a checklist for evaluating the trainees;
- structured, because every trainee sees the same problem and performs the same tasks in the same time frame;
- clinical, because the tasks are representative of those faced in real clinical situations;

Focus will be on how, what and why

Next registration exam 14th Feb pt1, 14th March pt2, Auckland venue

Meeting closed 2045

Next meeting T.B.A.