

► Report on the Meeting held at Auckland City Hospital - Monday 9th August 2004

Present:

Pat O'Brien, Janne Spher, Peter Brown (Whangarei) Lindsay Butler (ACH), Lisa Clark (NWH), Annie Gordon (Starship), Jimmy Cairns-Nelson (Tauranga), Mark Tumai, Sharad Kumar (Braemar) Wendy Dewstow (Gisborne), Lynne van der Waardt (Palmerston North), Janine Gunn (Hutt), Marcel Waayer (Wellington), Doug Williams (Christchurch), Lyall Trethowen, Louise Goodwin (Dunedin) and Joan Redpath (Invercargill).

Dr. Andrew Warmington.

Andrew outlined progress and issues with the Certificate of Proficiency Examination. He identified the reasons behind the introduction of the scenario to the examination programme and the pass/fail criteria. A concern that had been raised at a Regional meeting on the ceiling of numbers for the examination was addressed – that being that it was important that the examiners did not get fatigued and overwhelmed with too many candidates. To be fair to all candidates numbers should be limited. Amongst other matters, Andrew pointed out that the Committee recognised that it was important to move the examination regularly out of Auckland and have a wide base of examiners from around the country.

Andrew also noted some concerns in the general practice of some technicians such as their clean/dirty technique. Participants at the meeting were asked to consider what they would believe to be pass/fail criteria and pass those ideas onto Pat.

Pat O'Brien.

Pat gave a presentation outlining the issues with the development of the Diploma. (See NZATS Notices). Until NZATS is accepted into the HPCA (at least 1 year away if not longer) we will have funding only for certificate-level training. While we can keep the diploma in our sights we need to use the time effectively. To move on from here, the NZATS Executive have agreed that the Certificate programme needs to be made current, more effective and relevant, that a pathway needs to be created between Applied and Health Sciences, and that we need to develop 'applied' courses for qualified technicians that could be NZQA approved and graded on the academic scale. Examples of such courses could be an Airway course, the Simulation Programme in Wellington and an ACLS-type course more specific to anaesthetics.

Discussion

- Levels of Competencies

There was general discussion about the above. Also discussed was when is it appropriate for a trainee to carry out solo duties and do 'call'. As there is a great variant between the service needs of hospitals – tertiary, base, and private hospitals- that 'guidelines' would create difficulties for a number of hospitals and such guidelines may be impossible to adhere to. Instead the group agreed that Objectives would provide a better outcome for all.

- Record Book of Clinical Learning and Experience

Unknown to each other two members have been reviewing this manual –Karen Bennett (Palmerston North) and Louise Goodwin (Dunedin).

As the Dunedin review has progressed beyond the current level to include such units as Pharmacology, the group agreed that each participant would each take a copy of this document, review it and add changes as required.

- Marcel (Wellington) had drafted an assessment tool that was of interest to the group.

Dr Jennifer Weller

Assessment of Trainee Anaesthetic Technicians

Jenny, who, as well as her clinical position at ACH, is Senior Lecturer in Anaesthesiology, University of Auckland. Jenny also has a Masters degree in Education.

Jenny presented an excellent session with interaction from the group. There was a particularly good section on the Objectives for the knowledge, skills and attitudes required for the insertion of an LMA. The list filled up an entire whiteboard. The participants all received outline notes from this session.

Wendy Emson – AUT

Wendy is the programme tutor for our Certificate of Anaesthetic Technology course. Wendy is very pleased that the course will be reviewed. She identified that markers change around every few years which is good as fresh eyes bring new ideas. Each participant at the meeting was given a course descriptor and sections of the modules were allocated (on a voluntary basis!) to be reviewed. Louise Goodwin presented a reviewed schedule of the modules. The original date for the reviewed objectives was to be 1<sup>st</sup> November (In follow-up, Wendy has advised that this time frame needs to be tighter and so all participants will be advised of the new cut-off date – 1<sup>st</sup> October).

Where to from here.....?

It was agreed that a committee had been formed last year at the AGM but this group had only met once since that time and the main objective of that group had been the development of the diploma modules. Two members of this small group were also now not employed in an educational role. Following a previous proposal to the Executive, Pat believed that the forum of the present meeting would be far more inclusive given that notice of the meeting was posted to all training hospitals. She suggested that the present group of participants should form the Education Group.

The group should include NZATS members and members of the previous committee representing their training hospital's educational interest. Pat to report back to the Executive Board.

The group agreed to meet again at the Education Meeting at the Conference in Wellington.

All participants will be provided with opportunity for Feedback.

The day's programme finished at 3.30pm.