



**Speciality Practicum- Certificate of Proficiency
Registered Nurse Assistant to the Anaesthetist (RNAA)
Report Update: February 2016**

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1. Paper Overview

This paper was offered as a pilot 30 point paper – developed in conjunction with the NZ Perioperative Nurses in response to identified industry need. The purpose of the paper was to develop advanced diagnostic skills, and the application of critical reasoning to nursing practice decisions in Anaesthesia. The registered nurse, as an assistant to the Anaesthetist.

The paper was offered at North Shore Akoranga campus and was the first of its kind in New Zealand.

2. Paper Schedule

There were 6 classroom sessions (1 provided in a Clinical Skills Centre, 1 provided in a Simulation laboratory, and the other 4 sessions in regular lecture rooms.

The allocated hours were a total of 300- with 36 hours in classroom/laboratory session, 150 hours supervised clinical practice sessions and 114 hours of self -directed learning, over two semesters.

The pre-requisites set were considered appropriate including relevant theatre experience, and Manager approval.

All 9 students enrolled in RNAA were working in Operating Theatres around the country in public and private hospitals. The paper built on that prior learning and experience adding a depth of knowledge and increasing competency.

3. Learning Strategies

The majority of students were living outside of the Auckland region. To support their learning Blackboard technology was utilised with regular posting of resource material and online quiz (mandatory learning activities).

Local workplace mentors/supervisors/assessors were assigned to each student.

Clinical workbooks (developed by the RN/Anaesthetic Technology Expert) were issued to students and required sign off by the local assessor on practical skills when competency was demonstrated. Classroom sessions were interactive and held in simulated environments with access to the relevant equipment.

Subject matter experts (such as Anaesthetists, Anaesthetic and Biomedical Technicians, Nurse Educators and Product Specialists) were engaged in providing tutorials.

4. Assessment Process

The assessments covered learning outcomes 1 to 6 and included:

- Clinical workbook sign off completion (with accuracy). This was submitted to the RN/Anaesthetic Technology Expert for review, grading and feedback.
- Case Study- academic level assignment of 3500 words graded by Coordinator and RN/Anaesthetic Technology Expert.
- OSCE- oral and written sections (3 Subject experts engaged in the assessment process)

5. Resources

This was the first time the paper had been conducted at AUT. Specific resources to support the technical components of the paper needed to be sought for the teaching to be as authentic as possible. The Clinical Skills Centre at Auckland City Hospital was accessed along with University of Auckland's Simulation Centre for Patient Safety at Tamaki Campus.

Orientation sessions with students and their mentors/assessors were held via teleconference. While it was thought more helpful to have face to face sessions, the cost and logistics of bringing everyone together at the commencement and midpoint of the two semester paper were barriers.

6. Student and Stakeholder Feedback

In July 2015 formal feedback was sought from all students and other stakeholders who had been involved in the development of the paper.

Individual Feedback:

From a manager perspective I have noticed a huge difference, not only in the confidence of the students as they have progressed but also in their attitude to their work. They are interested, they want to make a difference, they question practice and want to improve on it.

I cannot praise this course enough, it has been very timely. I have gone from an extremely depleted anaesthetic workforce which every year I worry about to a stable enthusiastic confident workforce. The flexibility of these RNAA to potentially work in Anaesthetics, Theatre and PACU goes a long to solving so many staffing issues I have in the peri-operative area.

*I would not hesitate to enrol others on this course, and will be actively recommending it.
(RN & AT)*

A big thank you to you both for being amazing at facilitating, tutoring, examining, and following up promptly with concerns and questions, but most importantly for being incredibly motivating, inspiring and authentic people. That's what got us through! The hard work that you both put into this pilot course is very much appreciated.

7. Paper Coordinator and Lecturer Feedback

Overall, the paper was well received and students remained engaged for the two semesters and passed all requirements. As a pilot it was resource intensive – particularly in terms of paper coordinator time and RN/Anaesthetic Technology Expert time.

Highlights included:

- Simulation laboratory experience was popular with the students and regarded as valuable hands on learning
- Guest subject matter experts provided many of the valuable technically specific lectures
- Online resources including quiz to support preparation for clinical exercises were documented in clinical workbook. Although there were some establishment process issues, this proved a stimulating way of supporting individual study using online resources
- Clinical workbook- feedback received suggests that it is of a high calibre and very comprehensive
- Local senior staff within student's own organisation provided supervision- feedback received suggested that RNAA opened up more discussions and learning in the workplace
- Students established informal networks sharing ideas, protocols and procedures with their RNAA colleagues
- Positive feedback received from theatre management and anaesthetists about RNAA students' progress.

8. Grading Formula

Clinical workbooks were assessed based on level of completion and accuracy.
Case study written assignments were graded
OSCEs were graded

9. Good Practice Examples

One student with over 20 years' experience in the theatre/anaesthesia environment was pleased to identify new relevant learning taking this paper RNAA.
He was able to link up the many practical tasks that he was very familiar with to the new learning, and connect to the evidence in the literature.

18/02/16

As a result of RNAA student anaesthetic machine teaching, feedback received suggested that Theatre staff were more aware of professional requirements and all local policies had been reviewed and aligned accordingly

A number of students have initiated review of emergency management protocols as a direct result of learning on the RNAA course, in particular difficult airway management strategies and equipment.

10. Next Steps

An evaluation of the pilot RNAA has been undertaken with a formal report pending. Correspondence may be directed to Dr Roz Sorensen (rsorensen@aut.ac.nz)

Enrolments are being received for RNAA 2016 commencing March 2016.