

**Consultation on the Form  
of the Authority to Regulate  
Anaesthetic Technicians  
under the Health  
Practitioners Competence  
Assurance Act 2003**

Consultation document

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## **Invitation to Submit Comment**

### *1 Introduction*

On 1 November 2006, following consultation with the sector, the Minister of Health approved anaesthetic technicians as an additional profession for inclusion in the Health Practitioners Competence Assurance Act 2003 (the Act).

Having determined that anaesthetic technicians should become a regulated profession a second question arises: what form of regulatory authority should be given responsibility for regulating the profession?

This consultation document has therefore been prepared to seek your view on whether anaesthetic technicians should be regulated as a stand alone authority or by an existing authority.

This document:

- discusses the relevant provisions of the Act
- outlines the potential forms of the authority
- provides background information on the profession of anaesthetic technicians to assist consideration of which form is best
- asks specific questions to assist you to comment on this proposal.

### *2 Invitation to comment*

You are invited to submit your comments regarding the form of the authority to regulate anaesthetic technicians. In particular, it would be helpful to receive your response to all or any of the specific questions listed in **Appendix 1**.

Your submissions should be addressed to:

Ryan McLean  
Sector Policy  
Ministry of Health  
PO Box 5013  
WELLINGTON

Please note that all correspondence and submissions on this matter may be the subject of a request under the Official Information Act 1982. If there is any part of your correspondence that you consider could properly be withheld under that Act, please include comment to that effect and give reasons why you would want it withheld.

**The closing date for submissions is Monday 2 April 2007.**

### *3 Health Practitioners Competence Assurance Act 2003*

The principal purpose of the Act is described in section 3(1). That is:

#### **3 Purpose of Act**

- (1) The principal purpose of this Act is to protect the health and safety of members of the public by providing for mechanisms to ensure that health practitioners are competent and fit to practise their professions.

Under the Act, 15 registration authorities currently operate, charged with registering practitioners of the professions for which the authorities are responsible. These authorities ensure that health practitioners:

- are registered in a 'scope of practice' which describes the health services they can provide
- have the right qualifications for their scope of practice
- have a current practising certificate which has to be renewed each year
- maintain and develop their skills and competence
- have good English language and communication skills
- are physically and mentally able to work.

### **Role of scopes of practice under the Act**

Under the Act, the relevant registration authority plays a pivotal role in identifying the parameters of practice for registered practitioners and the qualifications and competencies required for registration.

A key concept under the Act is that of a 'scope of practice'.<sup>1</sup> The Act requires each responsible authority to describe the professions it regulates in terms of one or more scopes of practice and to prescribe the qualifications that a practitioner needs in order to be eligible to be registered in a scope of practice.

Any practitioner registered with an authority is required to be registered in a specific scope of practice. Registered health practitioners are not permitted to practise outside their scopes of practice, and responsible authorities are required, through the issuing of an annual practising certificate (APC),<sup>2</sup> to certify that the practitioner is competent to practise in their scope of practice. Only health practitioners who are registered with an authority are able to claim to be practising a profession covered by Act.

Some authorities, such as the Dental Council, regulate a number of professions.

### **Overlapping scopes of practice**

There are cases where scopes of practice under two or more professions overlap. It is possible for a practitioner to undertake aspects of another registered profession if the aspects of that profession are a part of the practitioner's scope of practice, for example, the treatment of mental illness or performance of acupuncture.

### **Cost of regulation**

Under the Act, each registration authority determines the fees for the profession or professions it administers, to provide sufficient revenue to cover the operating costs of the authority. These include fees for registration and the issuance of an annual practising certificate and other necessary levies (such as a levy to cover any disciplinary activity).

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<sup>1</sup> A scope of practice defines the boundaries within which a practitioner may practise his or her profession. It sets out the qualifications and competencies required to gain registration in that profession and the titles that only a practitioner, registered in that scope of practice, may use when practising.

<sup>2</sup> A practitioner must have a current APC in order to practise as a registered practitioner within a scope of practice.

Fees differ between authorities and reflect, among other things, the level of activity of each authority and the number of practitioners who are registered with it. There is no taxpayer subsidy for the operating costs associated with establishing and running an authority.

### **Who does the Act currently cover?**

At present, some 20 professions are regulated under the Act by 15 registration authorities. The professions are:

- chiropractors
- dentists, dental technicians, clinical dental technicians, dental therapists and dental hygienists
- dietitians
- dispensing opticians and optometrists
- medical laboratory scientists and technicians
- medical practitioners (such as GPs, psychiatrists, surgeons and other specialists)
- medical radiation technologists
- midwives
- nurses
- occupational therapists
- osteopaths
- pharmacists
- physiotherapists
- podiatrists
- psychologists.

### **How are additional professions added to the Act?**

The list of professions in the previous section is not intended to remain static. Section 115 of the Act enables the Governor-General, on the advice of the Minister of Health, to designate particular health services as a health profession under the Act. Having decided that a profession should be added to the Act, the Minister must then determine the appropriate form of the regulatory authority and may either:

- establish a registration authority to administer the registration of the profession; or
- provide that the designated profession be added to the profession or professions in respect of which an existing authority is appointed – thus creating a ‘blended authority’.

### **Stand alone authority**

A ‘stand alone’ authority is one that is responsible for the regulation of a single professional group.

A stand alone authority will need to raise sufficient funds to allow for establishment of the body and to allow the authority to undertake its statutory responsibilities. Authorities will raise funds by charging a fee for issuing APC.

It is worth bearing in mind that the level of fees required to ensure the financial viability of an authority for a small profession may place a significant financial burden on practitioners in that profession. The regulation of small professions as stand alone authorities also becomes difficult when appointments to the authority's governing body are being considered (the smaller the profession the smaller the pool of individuals who are capable of effectively regulating the profession).

### **Regulation under an existing authority**

A 'blended authority' is one that is responsible for the regulation of two or more professional groups. For a 'blended authority' to be feasible it is necessary that the professions to be regulated share similarities, for example, similar client groups or collegial relationships.

### **Models for structuring an authority that regulates two or more professions**

Where there are several similar but distinct professions to be regulated by the one authority, it may be possible to delegate responsibility for a group to a sub-board which sits underneath, and reports to, the main governing board or council. The Dental Council has adopted this approach and established four boards (the Dentists Board, Dental Hygienists Board, Dental Therapists Board and Dental Technicians Board) that sit under the main Council. Each board has advisory responsibility for one professional group and provides advice/recommendations to the governing council.

This approach allows some autonomy for setting scopes of practice and qualifications and competencies for an individual profession, while recognising that the professional groups are similar enough to be overseen by one regulating authority.

### **Potential regulatory partners for anaesthetic technicians**

The Ministry is aware that there is growing sector concern about the establishment of more regulatory authorities. Therefore, where the profession to be regulated has sufficient similarities, or has a significant working relationship, with another profession(s) currently regulated, it may be desirable that these professions are regulated by an existing authority.

In the case of anaesthetic technicians there are potentially three options.

#### **Option 1 – The Medical Council**

Due to the close working relationship between anaesthetic technicians and anaesthetists (anaesthetic technicians work under the direct supervision of anaesthetists) it is reasonable that the authority that is responsible for regulating anaesthetists (the Medical Council) might also regulate anaesthetic technicians.

#### **Option 2 – The Nursing Council**

While the argument for regulation of anaesthetic technicians by the Nursing Council is not as strong as for regulation by the Medical Council, many anaesthetic technicians are trained and have practised as registered nurses; therefore, potential also exists for anaesthetic technicians to be regulated by the Nursing Council.

#### **Option 3 – Establishing a Technicians Board**

The Ministry is aware of other technicians groups who are either in the process of preparing an application for regulation or have already submitted an application for regulation which the Ministry will be consulting on in the future.

If such an authority were to be established, it would require the two current authorities representing technicians groups (the Medical Laboratory Science Board and the Medical Radiation Technologists Board) to be amalgamated into the new authority.

Discussion questions to guide the consideration of proposals for the regulation of professions by either 'stand alone' or 'blended' authorities are attached as **Appendix 1**.

Background material on anaesthetic technicians is attached as **Appendix 2**.

## **Appendix 1: The Form of Regulation of Anaesthetic Technicians – Discussion Questions**

The Ministry of Health invites your views on whether anaesthetic technicians should be regulated by a **stand alone** or **existing authority** under the Health Practitioners Competence Assurance Act 2003.

To assist you in preparing a response, the Ministry has drawn up the following questions. You may wish to address all or just some of these questions in your submission.

1. Which would provide better protection for the public, a stand alone or blended authority, and what would be the impact on the public in regards to safety and treatment outcomes?
2. Are there any other reasons that it would be in the public interest to have a stand alone or blended authority?
3. To what extent do the activities undertaken by anaesthetic technicians overlap or coincide with the activities undertaken by other registered health practitioners?
4. If you consider there is potential for a stand alone authority:
  - Is the profession large enough and is there sufficient expertise within the profession to enable the appointment of an authority capable of making the decisions and performing the necessary functions expected of a registration authority to ensure public safety?
  - Are the suggested scope(s) of practice sufficiently discrete from those under existing authorities to warrant a stand alone authority?
  - Is the profession able to sustain the cost of a stand alone authority?
5. If you consider there is potential for regulation under an existing authority:
  - Which existing authority do you consider could cover anaesthetic technicians?
  - How big is the overlap or commonality in the qualifications and competencies for registration between the profession regulated by the existing authority and anaesthetic technicians?
  - How strong is the collegial relationship between the profession currently regulated and the profession to be regulated?
  - To what extent do the members of the existing regulated profession and anaesthetic technicians, work together in practise? If they do not, is it in the public interest that they work together more closely?
  - To what extent do anaesthetic technicians share the same/similar client group to the profession currently regulated?
  - Would there be a significant positive or negative impact on the existing authority and the profession it regulates if another profession was added to its sphere of responsibility?
6. How much support and/or opposition is there from within the affected professions for each of the options (blended or stand alone authority) and what reasons/rationales are given in support of these views?

7. Are there any other factors that support or detract from either option?

## Appendix 2

The following material has been provided by the New Zealand Anaesthetic Technicians Society (NZATS) for inclusion in this consultation document.

- An occupational definition of anaesthetic technicians.
- Evidence of the risk of harm from the practice of anaesthetic technicians.
- Minimum qualifications to practise as an anaesthetic technician in New Zealand.
- Suggested scopes of practice for anaesthetic technicians.
- International regulation of anaesthetic technicians.

This material is provided as background information for those wishing to make a submission and has been reproduced as provided by the NZATS. The views expressed are those of the NZATS and, in providing the material, the Ministry of Health is not endorsing or confirming the contents.

It is important to note that, while the NZATS has developed policy on qualifications and scopes of practice, these will not necessarily be the same as those put in place if the profession becomes regulated under the Act. Under the Act, decisions on scopes of practice, qualifications, and measures of competence will be entirely in the hands of the authority that is given responsibility for regulating the profession.

### *An occupational definition of anaesthetic technicians*

Anaesthetic technicians are defined by Statistics New Zealand in the New Zealand Standard Classifications of Occupations as:

#### **31332 Other Medical Equipment Controller**

Description:

- Operates, under the direction of medical professionals, a variety of medical equipment.

Tasks:

- Administers audiometric tests and examinations.
- Monitors anaesthetising equipment under the direction of an anaesthetist.
- Operates electro- and vector-cardiography equipment to provide cardiologists with recordings of changes in the electrical activity of the heart structure.
- Operates equipment to record electrical activity in the brain.
- Operates diagnostic and therapeutic equipment in renal medicine.

Training and/or experience required:

- New Zealand Certificate in Science, communication, organisational and technical skills.

The New Zealand Anaesthetic Technicians Society describes the role of anaesthetic technicians as follows:

Anaesthetic technicians usually work under the direct supervision of registered anaesthetists in both public and private settings. Anaesthetic technicians assist anaesthetists and prepare

operating theatres and clinics for anaesthetic procedures. This includes, but is not limited to, the following clinical procedures:

- insertion of indwelling cannulas such as intravenous lines
- insertion of nasal temperature probes into nasal cavities
- use of a haemocue for blood sampling to establish biomedical profiles
- insertion of intra-oral devices to maintain airway flow
- responsibility for the operation of anaesthetic machines that maintain airway flow while a patient is undergoing anaesthesia.

*Minimum qualifications to practise as an anaesthetic technician in New Zealand*

In the interests of safeguarding client wellbeing and protecting the public, the Ministry has requested that the NZATS specify the minimum qualifications needed to practise as an anaesthetic technician competently, capably and ethically. This minimum qualification will be necessary to register and practise as an anaesthetic technician under the Act.

The NZATS believes that registration as an anaesthetic technician requires the individual to hold the Certificate in Anaesthetic Technology, Diploma in Applied Science or an equivalent foreign qualification.

The Diploma in Applied Science is a more advanced qualification than the Certificate in Anaesthetic Technology and was introduced in 2006. For those practitioners who do not hold the Diploma, a grand-parenting scheme exists that recognises the practitioner's experience and enables them to continue practising. A stair-casing arrangement is available to those practitioners wanting to upgrade their existing qualifications.

The Certificate of Anaesthetic Technology is an accredited course of study offered at the Auckland University of Technology. Both qualifications comprise elements from both an apprenticeship model as well as academic study.

The view of the NZATS is that the minimum qualification to practise as an anaesthetic technician includes each of the following:

- a graduate qualification or equivalent level of general education
- specific theoretical and clinical training as an anaesthetic technician
- a pass in the NZATS clinical examination.

A detailed description of the training requirements of NZATS can be found on their website ([www.nzats.co.nz](http://www.nzats.co.nz)).

The NZATS administers *Standards of Practice*, which provide anaesthetic technicians, their team members, their employing hospitals and patients, with a measure of the expectations of qualifications and competences recommended for practise as an anaesthetic technician in New Zealand. A copy of the standards is obtainable on the NZATS website ([www.nzats.co.nz](http://www.nzats.co.nz)).

The Act has made provision for recognising qualifications and/or experience in section 12(2)(c):

A pass in a specified examination or any other assessment set by the Authority or by another organisation approved by the Authority' may be used to establish qualification for any scope of practice described by the Authority.

## *Suggested scopes of practice for anaesthetic technicians*

The following paragraphs discuss Scopes of Practice suggested by the NZATS.

### **1 Introduction**

The Health Practitioner Competence Assurance Act was passed on 18 September 2003 and became effective on 18 September 2004. If the practice of anaesthetic technicians is included within its framework, all persons wishing to practice as anaesthetic technicians will be required to register with the resulting registration authority and to work within a defined scope of practice.

The principal purpose of the Act is to 'protect the health and safety of members of the public by providing the mechanisms to ensure that health professionals are competent and fit to practise their profession'. In anticipation of the application of this legislation to the practice of anaesthetic technicians, the NZATS has developed a proposal for two scopes of practice intended to encompass the entire range of activities undertaken by anaesthetic technicians. This includes a anaesthetic technicians scope of practice and a 'trainee' scope of practice

### **2 Proposed scopes of practice**

#### **2.1 Anaesthetic technician scope of practice**

Registered anaesthetic technicians utilise technical and clinical judgement to assess health needs and provide patient care and assistance during all aspects of anaesthetic administration. Anaesthetic technicians provide support to the anaesthetist and collaborate and work alongside other health professionals during peri-operative, interventional and investigative procedures. Anaesthetic technicians may be required to provide anaesthetic support in operating theatres, radiology and MRI units, intensive care, labour wards and emergency departments. Anaesthetic technicians provide support for the safe transportation of patients. They work as team members alongside other health workers and provide physical and emotional support to the patient and enhance the safe outcome of anaesthetic procedures. The anaesthetic technician plans and prepares the equipment, monitoring and other requirements specific to each anaesthetic procedure. The technician ensures knowledge on procedural and equipment changes is current. Anaesthetic technicians are committed to quality improvement and provide support and teaching to junior colleagues and other staff as required. Anaesthetic technicians work within the limitation of the scope of practice specified to the area and employing hospital concerned.

This scope is designed for anaesthetic technicians who have completed the approved training.

The requirements for full registration are any of the following:

- An anaesthetic technician or anaesthetic nurse who has completed the Certificate of Proficiency under the Ministry of Health Training Scheme, prior to 1987.
- Completion of the Certificate of Proficiency under the Anaesthetic Technicians Training Board or Anaesthetic Technicians Board, prior to 2000.
- An anaesthetic technician or anaesthetic nurse who has completed the theoretical Certificate of Anaesthetic Technology and the NZATS Certificate of Proficiency under the NZATS Training Scheme.
- Overseas trained anaesthetic technicians must hold either an Operating Department Assistant or Operating Department Practitioner qualification that is

recognised by the New Zealand Qualifications Authority and the registration authority as being equivalent to a registration authority approved qualification, and who can provide documented evidence of completion of no less than 4160 hours post graduation anaesthetic clinical experience.

### **The requirements for provisional registration**

Provisional registration may be granted without examination for a period of up to two years to the following.

- Anaesthetic technicians and anaesthetic nurses whose qualification is recognised as equivalent by the NZQA and the registration authority but who cannot provide the required documentation of clinical hours required for inclusion in the general register.
- Candidates with provisional registration must work in an approved training hospital.

At the conclusion of two years or 4160 hours or at any other time upon completion of a recognised practical exam, the candidate may apply for full registration.

More detailed information on the proposed Anaesthetic Technician Scope of Practice can be found on the NZATS website ([www.nzats.co.nz](http://www.nzats.co.nz)).

### **2.2 Trainee anaesthetic technician scope of practice**

Trainee anaesthetic technicians learn, under supervision, the clinical and technical skills to provide patient care and assistance during the administration of anaesthesia and during anaesthetic procedures. Under supervision, trainee technicians provide support, relevant to their level of training, to the anaesthetist and collaborate with health professionals within the peri-operative, interventional, investigative and other clinical areas. Under supervision, they provide support for the safe transportation of patients. Trainee anaesthetic technicians learn to work as team members alongside other health workers. They learn to provide physical and emotional support to the patient to enhance the safe outcome of anaesthetic procedures. Under supervision, the trainee plans and prepares the equipment, monitoring and other requirements specific to each anaesthetic procedure. The trainee gains knowledge on procedural and equipment changes. The trainee learns and understands the significance of commitment to quality improvement. Trainee anaesthetic technicians work within the limitations of their scope of practice.

This scope is designed to accommodate all anaesthetic technicians currently undertaking the practical requirements of training for qualification as an anaesthetic technician as outlined in the training regulations of the NZATS.

The requirements for registration:

- Employment in a recognised training hospital as a trainee anaesthetic technician.
- Appropriate completion of the workbook documentation required by the registration authority for trainee anaesthetic technicians.
- Completion of up to 6240 hours' clinical training hours.

More detailed information on the proposed Trainee Anaesthetic Technician Scope of Practice can be found on the NZATS website ([www.nzats.co.nz](http://www.nzats.co.nz)).

### **3 Overseas qualifications**

Overseas qualifications and experience would be assessed against the standard set for general and trainee scopes of practice. Experienced practitioner status would be granted on a case-by-case basis but would still require the applicant to meet the competence specified by the registration authority.

## **4 Questions and answers about anaesthetic technicians**

### **4.1 What are anaesthetic technicians?**

Anaesthetic technicians assist anaesthetists and prepare operating theatres and clinics for anaesthetic procedures. Anaesthetic technicians perform a range of tasks before, during and after surgery which enables the anaesthetist to concentrate on the more complex tasks involved in anaesthetising a patient during surgery.

### **4.2 What do anaesthetic technicians do?**

Anaesthetic technicians are trained to assist anaesthetists by checking and setting up life support and anaesthetic machines, ordering and preparing medical supplies, explaining procedures to patients and checking whether they have any medical conditions that could create problems under anaesthesia, assisting the anaesthetist to insert intravenous lines and breathing tubes in patients, assisting the anaesthetist to administer anaesthetics to patients, administering intravenous fluids and basic anaesthetics to patients under the supervision of anaesthetists, watching patients and monitoring their vital signs before, during and after the operation, assisting the anaesthetist in emergencies, helping wake up patients after an anaesthetic.

### **4.3 Who do anaesthetic technicians work with?**

Anaesthetic technicians work with anaesthetists and other theatre staff to ensure appropriate delivery of anaesthetic medication to the patient. Anaesthetic technicians also work directly with the patient pre and post-operation.

### **4.4 How do anaesthetic technicians maintain their professional standards?**

To maintain registration technicians must maintain a minimum of eight hours' clinical work per week (averaged over a one-year period), while trainees are required to build on and maintain their professional competence throughout the training period. Currently there are no enforceable sanctions that can be applied for failure to comply with expected standards of clinical or professional competence.

With the continual development of technology anaesthetic technicians recognise the need for continuing education programmes so that practitioners are competent with the latest equipment and techniques. However, the lack of a legislative requirement for compulsory registration makes enforcement of a continuing education programme very difficult.

Recertification requirements for individuals who have not been in continual employment as a technician are in place. A three-month reorientation package is given to the technician if they are out of the workforce for more than 18 months and less than five years. A three-month reorientation package with an anaesthetic machine check test and practical questions by an examination team is required for re-entry after five years.

NZATS also runs a national anaesthetic conference annually. The conference allows anaesthetic technicians to keep up with the latest developments in New Zealand and around

the world. Registrations usually number between 60–100, with significantly more trained than trainee technicians attending.

#### **4.5 International regulation of anaesthetic technicians**

In the United Kingdom, compulsory regulation of anaesthetic technicians, or Operating Department Assistants (ODA) commenced in late 2004. Currently, only those ODAs registered with the UK Health Professions Council (HPC) are able to work in the United Kingdom. There are approximately 3500 registered ODAs in Britain.