

**Job Class Profile: Anaesthesia Assistant II****Pay Level: CG-41 Point Band: 950-993**

| Factor | Knowledge | Interpersonal Skills | Physical Effort | Concentration | Complexity | Accountability & Decision Making | Impact | Development and Leadership | Environmental Working Conditions | Total Points |
|--------|-----------|----------------------|-----------------|---------------|------------|----------------------------------|--------|----------------------------|----------------------------------|--------------|
| Rating | 6         | 5                    | 4               | 7             | 5          | 6                                | 6      | 4                          | 5                                |              |
| Points | 280       | 83                   | 25              | 33            | 150        | 130                              | 124    | 86                         | 54                               | 965          |

**JOB SUMMARY**

The Anaesthesia Assistant II performs advanced technical and therapeutic work in anaesthesia including leadership and administrative work in the development, implementation, co-ordination and evaluation of an anaesthesia assistant practice. Duties include developing, implementing and evaluating anaesthesia assistant protocols and clinical guidelines; consulting and communicating on practice issues to anaesthesia assistants and other health care professionals within health authority; and designing and implementing quality initiatives to support optimal patient care outcomes and program directions. Position also performs clinical work including the assessment, treatment and evaluation of care for patients during the process of anaesthesia care and the promotion of health and well-being.

**Key and Periodic Activities**

- Performs the full range of patient assessment, treatment and education functions as described for the Anaesthesia Assistant I.
- Provides leadership through support, mentoring, role modeling and other means to anaesthesia assistant personnel to enhance and optimize patient care services; consults and advises staff and other health professionals on therapy management and recommends approaches to patient care; collaborates with anaesthesiologists, program managers, professional practice consultant and peers to ensure identified patient care needs are met and recommends solutions to identified issues; monitors day to day clinical activities and identifies issues which may impact anticipated outcomes and/or service efficiencies; and performs administrative duties such as payroll and scheduling.
- Operates as a sole charge for a site of a multi-site organization and is responsible for the development of the entire program within the site with no guidance from a more senior anaesthesia assistant position.
- Organizes/chairs staff meetings; co-ordinates site activities; participates on broader program and respiratory therapy committees and sub-groups with mandates for professional practice standards, practice issues, strategic planning, continuing education, etc.
- Provides leadership in the development, implementation and evaluation of clinical practice standards of service in the preoperative areas with integration to interdisciplinary standards.
- Develops and maintains effective communication systems with anaesthesiology, program management, professional practice, other lead therapists and anaesthesia assistant staff within

### Key and Periodic Activities

- the health authority.
- Acts as the resource to anaesthesia assistants and other health professionals in the provision of care to patients with complex, multi-system problems requiring adaptive approaches to anaesthesia care; provides guidance to staff in the interpretation and application of policies and procedures.
- Co-ordinates orientation of anaesthesia assistants; evaluates competencies of staff; promotes competency based practice for anaesthesia assistants; establishes and maintains competency inventories for staff and facilitates development of knowledge and skills required for practice; participates in performance evaluation.
- Collaborates with the divisional manager and professional practice consultant, and others, in the performance evaluation review of anaesthesia assistant staff.
- Facilitates and ensures workload measurement collection by staff therapists; analyzes and interprets workload measurement statistics; and makes recommendations based upon indicators.
- Develops, co-ordinates and implements educational materials and programs for anaesthesia assistants, patients/families and other health care staff in collaboration with the professional practice consultant and program managers; liaises with educational personnel in Human Resources to co-ordinate educational needs of assistants.
- Provides clinical representation for the profession at the administrative level; participates in the planning and development of quality assurance and risk management programs.
- Participates in or initiates clinical research activities to improve the service provided.
- Evaluates and monitors patient populations and emerging trends of anaesthesia care and makes recommendations regarding staffing levels; participates in the budget process by identifying and recommending physical and equipment resources.

## SKILL

### Knowledge

#### General and Specific Knowledge:

- Anaesthesia, respiratory, nursing, ultrasound, pharmacy and biomedical engineering.
- New advancements in patient treatments, patient care outcomes and environmental safety.
- Organizational policies and procedures.

#### Formal Education and/or Certification(s):

- Minimum: 3 Year Specialized Program in Respiratory Therapy, Registration with the Canadian Society of Respiratory Therapists with a professional designation as a Registered Respiratory Therapist (RRT) or 3 Year Nursing Program or Undergraduate Degree in Nursing with licensure with the Association of Registered Nurses of Newfoundland and Labrador; plus post graduate Diploma in Anaesthesia Assistant Program.
- Certification in Basic Life Support, Advanced Cardiac Life Support (Preoperative Program), and Neonatal Resuscitation Program (Child Health Program).

#### Years of Experience:

- Minimum: 3 - 4 years.

**Competencies:**

- Ability to calibrate and/or repair machines and equipment.
- Ability to operate machinery (medical equipment).
- Computer, communication, and patient assessment skills.
- Critical thinking and decision making.

**Interpersonal Skills**

- A range of interpersonal skills are used to perform activities such as listening; asking questions; communicating routine and complex information and direction to peers, nurses and physicians; providing care/comfort/nurturing to patients in care; promoting ideas; instructing, teaching/training students, physicians and other health professionals; gaining the co-operation of others to complete work; addressing issues and/or solving problems; dealing with upset or angry people face to face waiting for surgery; and providing expert advice or counselling to others.
- Communications occur with a range of contacts including employees within immediate work area and department, supervisors/managers, sales representatives, students, and patients, and with employees/peers in other departments, suppliers/contractors, internal department executive, professional associations and professional advisors.
- The most significant contacts are with anaesthesiologists regarding patient care when required to take over while they leave the operating room for a break where proper communication is essential in order to care for the patient while having surgery; other physicians, program director, divisional manager, professional practice consultant and health care professionals regarding patient care, patient safety and specialized equipment; and anaesthesia residents, anaesthesia respiratory therapist, respiratory therapy students and support staff while addressing any concerns or questions regarding anesthesia, teaching/guiding students on different equipment, procedures and techniques required in their studies, and advising support staff on new policy changes or procedures.

**EFFORT****Physical Effort**

- The demands of the job regularly results in considerable fatigue requiring the need for strength and endurance.
- Regularly lifts up to 25 lbs. but occasionally lifts objects over 50 lbs., including lifting the head of a patient while inserting a breathing tube, positioning patients for surgery from their back to their stomach, pushing patients on stretchers from room to room, pushing heavy anaesthesia machines and moving large medical gas tanks.
- Regularly stands and walks in the performance of activities while moving patients and equipment from operating room to recovery or intensive care or to run quickly in the event of an emergency that needs assistance in the operating room; occasionally sitting (during surgery) and climbing (stepladders to reach for supplies).
- Occasionally works in awkward and cramped positions when anaesthetizing patients and having to use instruments needed to perform the procedure.
- Regularly uses fine finger or precision work when repairing and assembling anaesthesia related equipment (anaesthesia monitors, suction regulators, medical gas equipment, electronic

charting).

- Gross motor skills are required when positioning patients for surgery from their back to their stomach while maintaining airway and supporting neck or pushing patients on stretchers while bending over and manually assisting their breathing.
- When in surgery, where a lot of bleeding is experienced, must simultaneously operate a blood recovery machine, a rapid blood administration machine along with several medication pumps that contain different drugs.

### Concentration

- **Visual** concentration is required when observing patients during surgery, especially when relieving the anaesthesiologist for a break, while observing the monitors and patient for blood pressure, electrocardiogram (EKG), oxygen level and respiratory changes. Alertness and awareness with eyes as a result of moving from the monitors to the patient and being cognitive of the numerical values and the wave forms that are displayed on the monitor.
- **Auditory** concentration includes listening for alarms on ventilator or monitors, hearing acuity of patients' lungs, and determining whether patients are breathing adequately using a stethoscope. Also required to listen and respond to staff, patients, and other healthcare staff.
- Other sensory demands include **touching** a patient during a procedure to provide resuscitation or ventilation, as well as to administer medication. Uses **smell** to detect an anaesthetic gas agent leak during surgery.
- **Repetitive tasks that require alertness** are monitoring a patient when the anaesthesiologist leaves the operating room for a break and watching a monitor with 4-6 waveforms across a screen for 10-15 minutes at a time numerous times a day.
- **Eye/hand coordination** is required when giving medications while moving patients and when calibrating, repairing or operating anesthetic equipment.
- **Time pressures, deadlines and/or interruptions** include emergencies, changes in operating room scheduled surgeries, the availability of medical residents and unscheduled events. As well, may be requested by physicians for attendance and/or relief in numerous operating rooms within the facility which results in starting in one operating room and then moving to another in order to prevent delays or cancellations of surgery.
- **Exact results and precision** is required for the calibration of patient equipment ranging from life support to diagnostics.

### Complexity

- Tasks and activities are different/unrelated, (i.e. administrative and clinical work) and require the use of a broad range of skills, and a diversity of knowledge. Regularly, tasks are repetitive/well defined, different, but related.
- Constantly deals with highly technical tasks or problems, challenges/problems/issues where ideas for solutions may be provided in a team setting. Some unique/multi-functional problems exist.
- Typical complexities, from an administrative perspective are managing staffing issues, trying to replace staff on short notice, trying to co-ordinate and manage the demands for the service, and problem solving issues with non-functioning equipment. From a clinical perspective, a typical challenging problem includes patient assessment and care while relieving the anaesthesiologist during surgery.

- References used to address challenges/problems/issues include anaesthesiologists, manager, professional practice consultant, biomedical staff, vendor representatives, national list services, operational manuals, internet websites and policies and procedures.

## RESPONSIBILITY

### Accountability and Decision-Making

- Work tasks and activities are somewhat prescribed or controlled.
- Makes decisions regarding scheduling of staff, providing relief for staff, peer review of staff, evaluating new equipment with the required documentation through the purchasing department, purchasing or repairing of equipment up to \$4,000.00 and developing policies and procedures that pertain to the anaesthesia practice.
- Requires approval for large-scale purchases of equipment and policy/procedure changes.
- Has discretion within predetermined limits and procedures in relation to ensuring departmental policies and practices are being followed, calling staff back to work, and exercising discretion and judgment in patient care procedures, and treatments. Exercises a high degree of discretion in supervising the day-to-day activities, staff coverage, workload assignments, and with patients in relation to their care.
- Discretion and judgment are used to interpret directions and apply guidelines to make clinical decisions in patient care activities within professional standards, and administrative decisions in relation to adequate staffing levels to ensure patient safety. Functions with significant autonomy when monitoring a patient and administering medications to maintain anaesthesia.
- Provides information, advice, and recommendations to members of the interdisciplinary team, patients, physicians, and students related to the anesthesia practice, treatments, procedures, tests, and results. May also provide advice, guidance, direction, and instruction to respiratory staff in their activities.

### Impact

- Work activities have an impact on the immediate work area, within the department, outside the department and organization, and on patients. The most significant impacts are on health and safety of patients.
- There are positive and negative impacts resulting from the decisions made regarding equipment (repair and purchase), processes and systems (instruct/guide physicians and residents on the proper use of ultrasound; development of policies and procedures, etc.), information (providing expert advice on anesthesia and respiratory to health care professionals), finances (budget process by recommending capital equipment), material resources (special order items to maintain adequate levels), human resources (scheduling/training staff), health and safety (patients) and corporate image.
- Errors that could occur involve patient management such as performing procedures incorrectly, giving patients wrong medications and errors in documentation. Administrative errors are incorrect scheduling of staff, errors with the purchasing and ordering of supplies or the evaluation of equipment.
- Work tasks and activities are somewhat prescribed or controlled. Problems are identified within hours of identification and detected by either the employee or the physician and appropriate adjustments are made immediately. Safety policies and procedures are in place that would

mitigate this happening.

### **Development and Leadership of Others**

- Responsible for supervision of a small size work group (1 to 4 employees).
- Provides information and advice to educational institutions such as the Memorial University of Newfoundland (MUN) Medical School, School of Pharmacy, College of the North Atlantic and routinely instructs educational sessions to physicians and health care professionals.

## **WORKING CONDITIONS**

### **Environmental Working Conditions**

- Required to wear masks (i.e. sometimes n-95 respirators), respirators for formulin or cidex spills, gowns and gloves for all invasive procedures, eye shields for protection against blood splatters and practices universal and safety precautions including yearly in-service for patient movement and positioning to prevent back injury and utilizing eye wash station for accidental eye contamination.
- There is limited likelihood of receiving minor cuts, bruises, and illnesses, and limited likelihood of receiving fractures, or a partial or total disability.
- Exposed to unusual/distracting noise (equipment used in surgery), fumes (bone cement fumes), hazardous chemicals (formalin or cidex), infectious diseases (HIV, TB, H1N1, etc.), sharp objects (needles), odours (bowel surgery and purulent infections), bodily fluids and waste (needle sticks, draw and administer blood products), wet and slippery areas (operating room floors cleaned after each case), radiation (x-rays), physical dangers or threats (patients waking up from surgery are sometimes confused/aggressive), and heavy equipment (moving anesthesia machines from operating room to angiography suite or large medical gas tanks).