

HEART OF ENGLAND NHS FOUNDATION TRUST

DIRECTORATE OF ANAESTHETICS

JOB DESCRIPTION

Title: Physicians' Assistant (Anaesthesia) or PA(A)

Grade: 8a

Accountable to: Clinical Director for Anaesthetics

Responsible to: Lead PA(A)

Job Summary: To deliver anaesthesia for elective and emergency surgical patients using national and local guidance, protocols and procedures. The PA(A) has been trained to assess the need for guidance / consultation with consultant anaesthetists and will be expected to seek this where appropriate. A named consultant will always be available during the induction and reversal of anaesthesia and, in accordance with current Royal College of Anaesthetists guidance will remain proximally available during the entire procedure. However the PA(A) can act independently during the conduct of anaesthesia and make decisions regarding the management of expected and unexpected physiological changes and make adjustments to the conduct of the anaesthetic where necessary . The PA(A) has been trained to ask for immediate support / help where appropriate. Anaesthetic management will include preoperative assessment and consultation, delivery and reversal of anaesthesia and postoperative care. Other significant duties would involve management of cardiopulmonary resuscitation and / or other emergency, life sustaining services within the hospital environment.

Duties and responsibilities

1. Pre-operative assessment to include a visit to the patient on the ward, taking a full medical and anaesthetic history and examination of the cardiovascular and respiratory systems and a detailed airway assessment. In addition there will be a requirement for requesting and interpretation of investigations. These may include chest x-rays, electrocardiograms (ECG's), full blood counts, urea and electrolytes, clotting profiles, arterial blood gases, pulmonary function tests.
2. Use of and independent interpretation of sophisticated monitoring systems including pulse oximetry, ECG, invasive and non-invasive blood pressure, spirometry, capnography and airway gas analysis, central venous pressure.

Direct patient communication including procedure explanation and reassurance. Supervision and direction of other healthcare professionals including Operating Department Practitioners and Anaesthetic Nurses. The insertion of peripheral venous cannulae, arterial cannulae and central venous cannulae – where appropriate. The direct administration of anaesthetic induction and maintenance drugs, opiate and other analgesics, paralysing agents – where appropriate. Insertion and verification of correct placement of airway devices including laryngeal masks, Guedel and nasal airways and endotracheal tubes using a laryngoscope. Checking and connection of sophisticated anaesthetic machines and breathing systems, and utilisation of a artificial ventilation (including several different ventilation modalities) where appropriate. Connection and administration of a variety of different intravenous fluids according to patient need. Independent administration of prescribed drugs for cardiovascular support where appropriate. Independent adjustment of quantity of anaesthetic drug according to complex judgment of depth of anaesthesia. Safe reversal of anaesthesia and extubation of patient to include safe transfer and handover of patients to the post-anaesthetic recovery area.

3. Make a detailed handover of the semi-conscious patient to recovery staff including handover of the patient's airway. Ensuring adequate analgesia, oxygen and fluids are prescribed. A postoperative visit to ensure there are no immediate postoperative complications and adequate ongoing fluid therapy and analgesia. This may require further patient examination of the respiratory and cardiovascular systems.
4. The ability to communicate and understand highly complex information when in consultation with consultant anaesthetists, surgeons and other medical, nursing and Allied Health Professional colleagues. This includes, but is not restricted to human anatomy and detailed physiology and pathology; drugs effects and interactions including pharmacodynamics and pharmacokinetics. Also, discussions regarding the results and patient implications of undertaken investigations. To communicate highly complex information in an understandable form to patients (according to the patient's individual level of understanding) regarding the conduct of anaesthesia, including complications / side effects of drugs and procedures. Provide professional advice to staff within areas of responsibility including teaching and training of more junior staff. Attend regular national meetings representing the PA(A) profession, being an ambassador for heart of England NHS Foundation Trust by contributing to advice in the development of this role.
5. To be competent and able to utilize complex skills in the assessment of patient anatomy, physiology and pathological conditions. Interpret routine and specialist investigations identifying abnormalities that need the attention of, or discussion with the Consultant Anaesthetist. Recognize emergency situations, report accordingly and assist in the management of these. To decide on the most appropriate use of a broad variety of techniques, anaesthesia agents, drugs and equipment in providing anaesthesia care. To identify when this needs to be discussed with a Consultant Anaesthetist. To interpret and utilize data obtained from the effective use of current invasive

and non invasive monitoring equipment. To be appropriately skilled and experienced to work in an environment which is difficult, demanding and unpredictable, dealing with a number of multifaceted situations simultaneously, then assisting with the formulation of a plan and adjusting accordingly. To identify and manage potential equipment failure taking appropriate action. To initiate and manage fluid and blood therapy as appropriate.

6. Plans anaesthetic provision within a prescribed framework. Administers drugs as agreed with supervising anaesthetist. Initiates and manage fluid and blood therapy within the plan of care. Adjusts and re-evaluates anaesthetic provision in response to individual patient variations (with consultation where appropriate). e.g. adjustment of depth of anaesthesia, adjustment of patient heart rate or blood pressure in response to expected or unexpected physiological changes. To ensure best practice is delivered in line with Clinical Governance and national standards, policy and protocol.
7. To exercise high levels of accuracy speed and manual dexterity in procedures required for the role. Examples: 1. Airway management may include the rapid and accurate insertion of advanced devices such as endotracheal tubes – time limited due to levels of oxygen or carbon dioxide retention – requiring use of a laryngoscope, identification of vocal cords, insertion of tube, checking of tube position and connection to anaesthetic breathing system. 2. Insertion of a central venous catheter requires full aseptic technique, identification of anatomical landmarks, correct positioning of the patient, needle aspiration of blood from central vein, Seldinger wire insertion, surgical incision, insertion of cannula, checking correct placement, safe flushing of line, connection to appropriate lines, suturing line in place. This procedure may require the use of sophisticated doppler ultrasound devices. Time limited due to total anaesthetic time. 3. Insertion of arterial cannula requires advanced hand eye coordination and a highly developed two point discrimination due to the technique of cannulating blindly based on pulse pressure alone.
8. Assesses, develops and implements complex anaesthetic programs within prescribed framework, providing specialized advice to the surgeon on anaesthetic care of the patient. Evaluates and / or collects patient information from the patient's history, physical examination, laboratory, radiographic and other diagnostic data and identifies relevant problems. Where appropriate, provides advice to surgeon on anaesthetic care of the patient.
9. To assist in the development of protocols and patient specific directives. Design of, and contribution to policies and changes. Adheres to Trust policies and relevant codes of practice. Responsible for initiating and implementing Policies, Procedures, Guidelines and Standards within own area and contribute towards the ratification of Trust-wide and national policies for the development of the PA(A) role. In conjunction with the Clinical Director, implements when appropriate new ways of working. Works with Multi-

disciplinary Team to develop and implement policies, procedures and guidelines.

10. Responsible for the safe use and setting up of expensive and highly complex anaesthetic equipment. Assist with the implementation of care plans across the wider anaesthetic team. To monitor and maintain a safe, clean and therapeutic environment for staff patients and visitors, initiating appropriate action to achieve this. To use resources appropriately to ensure high quality and cost effective service. Contribute to team expert advice on the purchase of expensive / sensitive equipment that impact on the speciality. Maintain Team budgets in a responsible manner, including study budgets for team members.
11. Monitors, and tends to the human resource needs of the Anaesthetic Support Team's members. To include regular staff appraisal. Introduction and induction of new members of the team. Participate in the education of patients and their carers. Participate in the teaching, supervision and assessment of other team members. Clinically supervise ODPs and other members of staff in the anaesthetic environment in the absence of a consultants presence. Contribute to promoting, planning and processing PA(A) recruitment within the Trust. In the absence of a consultant anaesthetist provide expert advice and support to operating Department Practitioners and trainees in times of crisis or stress facilitating access to staff counselling as appropriate. Delivery of core training at post graduate level for trainee PA(A)s.
12. To updates patient records and to enter patient information into theatre databases where these exist. Maintenance of accurate and up to date logbook database of activity. Maintain adequate audit trail and log of the activities of the Anaesthetic Support Team. Responsible for timely, accurate and complete records both manual and electronic ensuring safety and confidentiality of information with statutory requirements.
13. Monthly participation in the process of audit, morbidity / mortality reviews with a view to improving patient care as part of the wider anaesthetic team. To assist the Clinical Director in the research and evaluation of the National PA(A) program, including the collection and analysis of data required. Regularly contribute to safe care plan including taking the lead in clinical audit in individual area of practice. Contributing to the implementation of the Trust's Research and Development Strategy and promoting evidence based care.
14. The PA is accountable for his / her own professional actions. The PA has been trained to assess the need for guidance / consultation with consultant anaesthetists and will be expected to seek this where appropriate. A named consultant will always be available during the induction and reversal of anaesthesia and, in accordance with current Royal College of Anaesthetists guidance will be remain proximally available during the whole procedure. However the PA can act independently during the conduct of anaesthesia and to make decisions regarding the management of expected physiological

changes and make adjustments where necessary within the remit of trained competencies. Also, the PA has been trained to ask for immediate support / help where appropriate. Promote and contribute to the development of new ways of working in anaesthesia as the lead specialist of the role of PA(A). To ensure own actions support equality, diversity and rights.

15. Works in restricted position in operating theatres on a daily basis. Maneuvers patients from table to bed, bed to table on a daily basis. Assist in the positioning of patients as required for surgical procedures on a daily basis. Respond to clinical emergencies performing cardiopulmonary resuscitation when required
16. Intense concentration on patient for lengthy periods whilst delivering anaesthesia e.g. watching for the usual side effects of anaesthetic and opiate drugs and reacting accordingly and adjustment of the depth of anaesthesia depending on patient responses. The majority of anaesthetic drugs have side effects or dose effects that could produce severe harm or fatality if great care is not taken. The PA has been trained in the pharmacology of these drugs and to watch for the multitude of these dangerous effects and the need for constant vigilance. Similarly, artificial ventilation when performed inadequately or excessively can be highly dangerous and is therefore carefully monitored. The PA has been trained in these areas and needs to deliver and monitor this procedure carefully at all times.
17. To be exposed to discussions with patients preoperatively who may be known to have terminal conditions. To explain side effects or complications of anaesthesia or procedures to patients which may be life altering or even fatal. To act as a member of the cardiopulmonary resuscitation / trauma team where the outcome is frequently death. Due to the nature of acute speciality, to expect and deal with distressing patient circumstances including terminal diagnoses and death. On occasions to be part of a team involved in the unexpected death of a patient. In addition, to contribute to team support to other junior members of staff in these circumstances.
18. Frequent highly unpleasant conditions such as daily exposure to uncontained body fluids (blood from arterial lines, neck lines, sputum, faeces, vomit and urine) and open wounds during surgery. Frequent exposure to noxious volatile anaesthetic gases.

This job description is not exhaustive and may be subject to change as the Physicians' Assistant (Anaesthesia) role develops.