



# Nova Scotia College of Respiratory Therapists Position Statement on Anesthesia Assistant Role (Revised December 2022)

## **Introduction**

Anesthesia Assistant (AA) is a designation carried by health care professionals with beyond entry level competencies who participate in the care of the patient during general, regional, or procedural sedation anesthesia through medical directives or direct orders, under the supervision of an anesthesiologist.

The Respiratory Therapists Act defines the scope of practice of Registered Respiratory Therapists (RRTs) which includes “performing anesthesia assistance within the scope of practice of the profession, ... such delegated medical functions as are approved in accordance with the Medical Act” (Respiratory Therapists Act, 2007). Respiratory therapy education provides entry level didactic and clinical education related to anesthesia assistance.

The Nova Scotia College of Respiratory Therapists (NSCRT) has determined that the AA role, defined in the 2022 update of the Canadian Anesthesiologists Society (CAS) Guidelines to the Practice of Anesthesia (Canadian Anesthesiologists Society [CAS], 2022a), and 2022 Position Paper on Anesthesia Assistants update (CAS, 2022b), falls within the scope of practice of Respiratory Therapists.

The NSCRT supports the role of AAs within the anesthesia care team as being in the public’s best interest. Anesthesia Assistants enhance patient safety and improve efficiency in anesthetic care. The CAS addresses ancillary personnel in the Guidelines to the Practice of Anesthesia 2022 update as follows: “The health care facility must ensure that ancillary personnel are available as assistants to the anesthesiologist. Such assistants must be available at all times and places where anesthesia services are provided... It is recommended that facilities have a formally designated anesthesia assistant with specific training in anesthesia assistance” (CAS, 2022a).

## **Purpose**

The purpose of this position statement is to guide RRTs practice, and employers, and health agencies to ensure that individuals who fulfill the role of Anesthesia Assistants are appropriately qualified as described in this paper.

## **Position Statement**

The NSCRT requires all RRTs to practice within the NSCRT legislated scope of practice, their individual scope of practice, and their scope of employment.

The Canadian Society of Respiratory Therapists (CSRT) developed the National Competency Framework in Anesthesia Assistance (NCF AA) (Canadian Society of Respiratory Therapists [CSRT], 2016). This framework defines entry level competencies related to assisting with anesthesia. RRTs enter practice with competencies related to assisting with anesthesia however, the NSCRT advises that the level of competency defined in the NCF AA is beyond entry level competency of RRTs.

To practice as AAs, RRTs must obtain competencies beyond entry level competencies as defined in the CSRT NCF AA. These competencies are set out in the “Competencies” section of this Position Statement. These competencies can be achieved through an RRT completing an accredited AA education program, approved by the NSCRT. In addition, the NSCRT encourages AAs to obtain and maintain their Certified Clinical Anesthesia Assistant designation (CCAA) with the CSRT, as such certification includes a continuing competence component. This certification supports the consistency of practitioner qualifications, and the quality and safety of AA practice.

We recommend that employers and health agencies, who employ ancillary personnel within their anesthesia care team, ensure that:

- a) The role of anesthesia assistant is filled by regulated health care professionals who possess the competencies defined in the CSRT NCF AA.
- b) The health agency should define the AA role that is appropriate to the context of practice and client needs within the institution. The scope and boundaries of this role should be clearly defined in health agency policy and role descriptions.

## **Qualifications**

The NSCRT recommends that, in the interest of public protection, AAs possess entry level competencies that relate to supporting anesthesia care. These entry level competencies are best achieved by the AA successfully completing the following:

- an anesthesia assistant program from an accredited educational institution approved by NSCRT, including an anesthesia assistant clinical practicum, and
- successful attainment and maintenance of the Certified Clinical Anesthesia Assistant designation exam.

Respiratory Therapists practicing as AAs have the same professional responsibilities as RRTs in other areas of practice. They shall:

- practise within the profession's legislated scope of practice,
- practise within their individual scope of practice,
- adhere to the principles of ethical and professional conduct,
- apply professional standards of practice,
- practice within their employer's defined scope of employment,
- adhere to employer policy regarding medical directives and medication orders, written and/or verbal,
- be accountable for their practice through appropriate documentation as defined in the NSCRT Documentation Guideline, and employer policy, and
- provide safe and competent care and respect the confidentiality and dignity of all individuals.

### **Required Competencies**

The CSRT NCF AA introduction describes the document as follows: "The National Competency Framework for Anesthesia Assistance (NCF AA) is a practical tool for use by educators, accreditors and students for the design and maintenance of education programs in anesthesia assistance. Employers and managers will rely on the NCF AA for performance appraisal, professional development as well as for promotion and recruitment purposes. In addition, the public, other health care professionals, governments, industry, and other stakeholders will use the AA NCF to obtain guidance regarding the practice and competencies of anesthesia assistants" (CSRT, 2016).

The CSRT NCF AA defines the clinical competencies for AA practice as follows:

- Administer pharmacological agents under the direction of the attending anesthesiologist
- Operate anesthesia equipment
- Monitor the patient's physiological status
- Provide preoperative care
- Manage the patient's airway
- Assist with the administration of general anesthesia
- Delivery of regional anesthesia
- Deliver procedural sedation
- Manage post anesthesia care
- Assist with pain management

- Perform crisis management
- Administer blood products
- Assist with the delivery of anesthesia in special circumstances

Each competency is articulated to describe the level of knowledge, skill, and attitude required to achieve the competency level required to safely perform the competency in clinical practice (CSRT, 2016).

## **Training and Education**

The NSCRT recognizes accredited Anesthesia Assistant education programs in Canada.

[AA Program Accreditation - CSRT](#)

## **References**

Canadian Anesthesiologists Society (2022a). *Guidelines to the Practice of Anesthesia* (Rev.ed.) [https://www.cas.ca/CASAssets/Documents/Practice-Resources/Guidelines/Dobson2021\\_Article\\_GuidelinesToThePracticeOfAnest 1.pdf](https://www.cas.ca/CASAssets/Documents/Practice-Resources/Guidelines/Dobson2021_Article_GuidelinesToThePracticeOfAnest 1.pdf)

Canadian Anesthesiologists Society (2022b). *Position Paper on Anesthesia Assistants* [https://www.cas.ca/CASAssets/Documents/Practice-Resources/Guidelines/Appendix-5\\_2022.pdf](https://www.cas.ca/CASAssets/Documents/Practice-Resources/Guidelines/Appendix-5_2022.pdf)

Canadian Society of Respiratory Therapists (2016). *National Competency Framework for Anesthesia Assistance* <https://www.csrt.com/wp-content/uploads/Validated2016AANationalCompetencyFramework.pdf>

Nova Scotia College of Respiratory Therapists (2020). *NSCRT Documentation Guideline* [https://www.nscrt.com/images/202002\\_Documentation\\_Guideline.pdf](https://www.nscrt.com/images/202002_Documentation_Guideline.pdf)

Respiratory Therapists Act. 2007, C.13., S.1. [https://www.nscrt.com/pdf/resources/Bill\\_141\\_RT\\_Act.pdf](https://www.nscrt.com/pdf/resources/Bill_141_RT_Act.pdf)