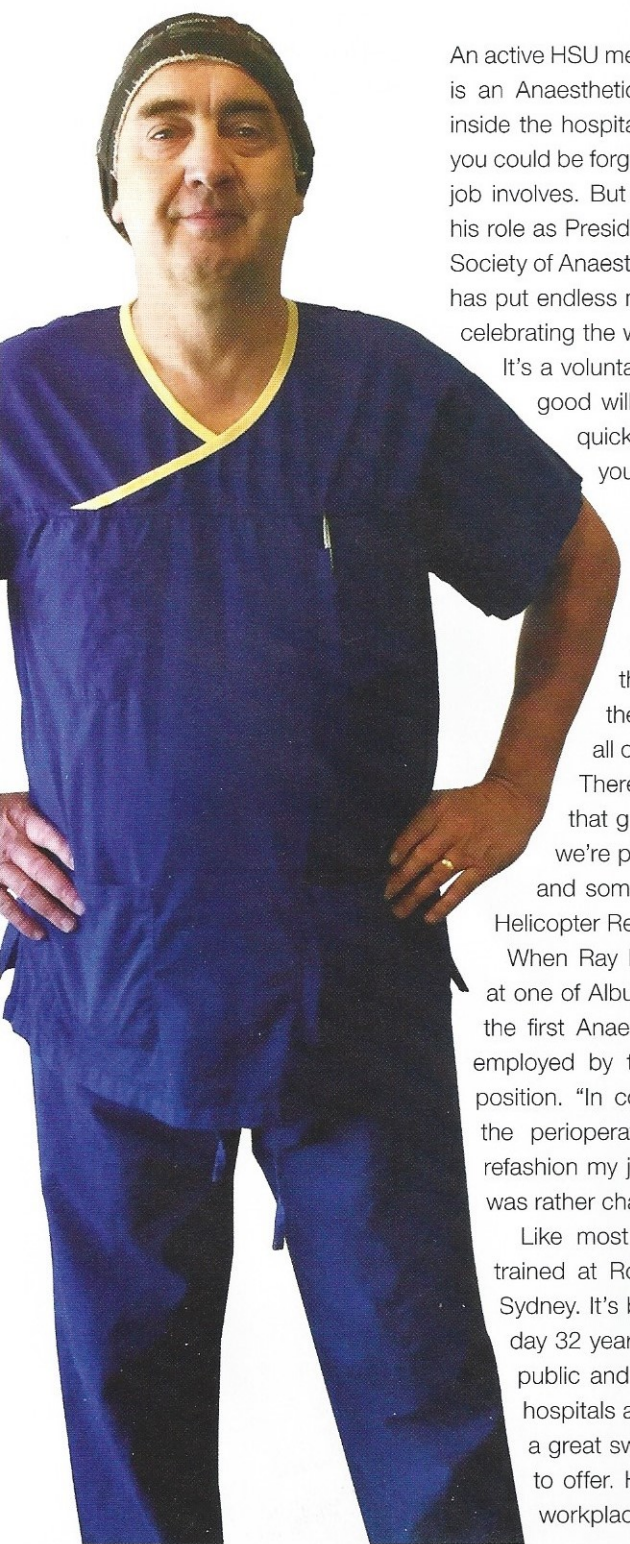


RETURN TO THE THEATRE

Ray Murtagh puts many of us to shame. While it's not uncommon to be physically and mentally exhausted after finishing a shift, Ray manages to balance a challenging and inspiring full-time job while chairing a professional association and being a father. What's the source of his energy? The answer is, he draws strength from his love for his profession, and his untiring desire to lend support to others in his position.



An active HSU member for almost 20 years, Ray is an Anaesthetic Technician. Burrowed deep inside the hospital, they're not often seen, and you could be forgiven for not knowing what their job involves. But Ray is out to change that. In his role as President of ASAPO, or Australasian Society of Anaesthesia Paramedical Officers, he has put endless man-hours into promoting and celebrating the work of his professional group.

It's a voluntary role, entirely dependent on good will, and there's an impetus that quickly comes to the surface when you talk to him.

"The role comes with enormous responsibility," he says. "An Anaesthetic Technician is the principal assistant to the Anaesthetist, they maintain and prepare all of the equipment, as well as assist all of the other perioperative team. There's a lot of skills and training that goes into it – in some hospitals we're part of the resuscitation teams, and some of us are even employed in Helicopter Retrieval Teams."

When Ray began in his current position, at one of Albury's Private Hospitals, he was the first Anaesthetic Technician ever to be employed by this organisation, in a senior position. "In cooperation with the heads of the perioperative department we had to refashion my job description," he laughs. "It was rather challenging."

Like most people in his position, Ray trained at Royal Prince Alfred Hospital in Sydney. It's been a long journey since that day 32 years ago. Having worked in both public and private sectors, large trauma hospitals and smaller facilities, he's seen a great swathe of what the industry has to offer. He speaks well of each of his workplaces, however, and has been

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particularly happy with his time in Albury.

Having worked in the role for such a length of time, Ray has been able to witness first hand the changes that the job has been through. Though they may have been small, gradual changes, Anaesthetic Technicians are now barely recognisable from what they once were. For one thing, there's a lot more responsibility: "When I first started, I just sat there with a blood pressure cuff and a stethoscope and checked the patient's blood pressure every five minutes... over the years the role has changed so much that I think it's a little misleading to call it a technical role. It's more of a clinical role. There's also a very strong interpersonal element, we work very closely with patients."

Along with the changes have come a number of challenges, however. This is where the advocacy and policy consultancy side of ASAPO comes into play. When we caught up with Ray, the association had just held its AGM in Brisbane, and out of these discussions came a plethora of strategies to overcome current threats to the profession.

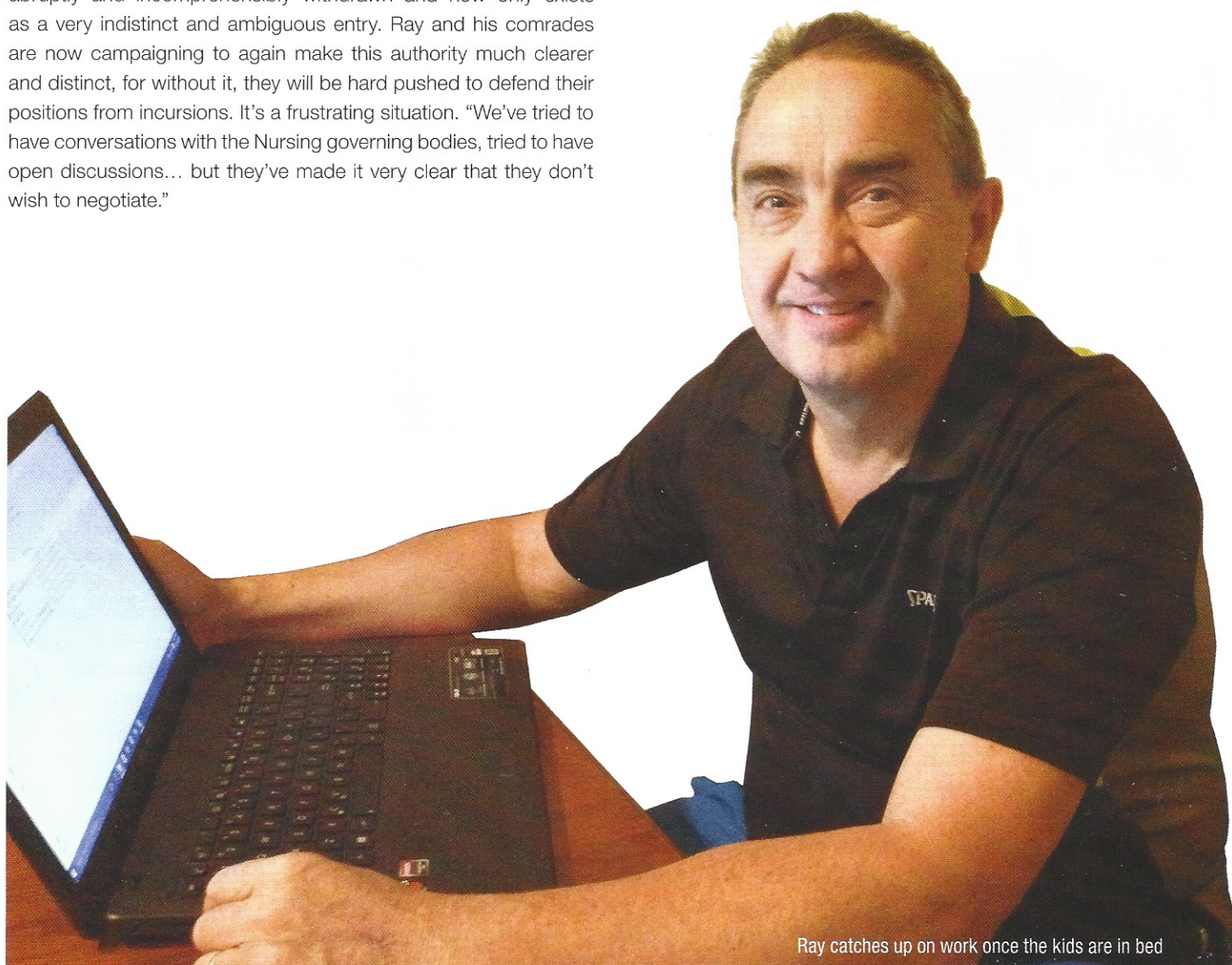
Chief amongst these was the necessity to change the name of the professional association, as the term Paramedic will now become a protected title in South Australia. At the association's AGM it was unanimously decided

to change the title of the association to Australian Anaesthesia Allied Health Practitioners, or AAAHP. This will come into effect from the 1st of January next year. Another worrying fact is that their qualification, Diploma of Anaesthetic Technology, is no longer offered in NSW. This means that no new Anaesthetic Technicians are emerging – but the AAAHP is already investigating alternatives. You can be sure that, with these committed professionals on the case, there'll be a solution in sight before long.

In an unfortunate turn of events, another threat comes not from outside, nor even hospital management, but rather co-workers. Increasingly, nurses are encroaching on Anaesthetic Technicians' domain. Arguing vehemently in their own favour, they are replacing people like Ray in some hospitals. This is very concerning given the specialised skills that Anaesthetic Technicians bring to the table. "The AAAHP does not have an issue with nurses working as assistants to the Anaesthetist, as long as they possess similar qualifications in anaesthesia to Anaesthetic Technicians and their qualification is in line with the Australian New Zealand College of Anaesthetists guidelines," says Ray. The ability to administer S8 medications under the direction of a medical officer or Anaesthetist, once clearly listed in the NSW pharmacy guidelines, has been abruptly and incomprehensibly withdrawn and now only exists as a very indistinct and ambiguous entry. Ray and his comrades are now campaigning to again make this authority much clearer and distinct, for without it, they will be hard pushed to defend their positions from incursions. It's a frustrating situation. "We've tried to have conversations with the Nursing governing bodies, tried to have open discussions... but they've made it very clear that they don't wish to negotiate."

Most of all, Ray wants to spark a dialogue within his own profession, something that will urge Anaesthetic Technicians – often removed from other hospital workers by mere virtue of being physically separated – to speak out on their own behalf. "We know for a fact that there are more than 25 Anaesthetic Technicians in this state... we want them to join the HSU, join AAAHP, and stand up for their rights in the perioperative environment." The AAAHP is also pushing forward with its efforts to the federal government to get stronger recognition for Anaesthesia Technicians, and get them registered as a national profession with APHRA, but to achieve this AAAHP needs the support of Anaesthetic Technicians nationally.

It should come as no surprise that Ray gets tired sometimes. "Sometimes it gets very hard, particularly with a young family," he admits. He is preparing to step down as President of the AAAHP at the beginning of next year, and hand over the reins. He will, however, remain deeply involved, and has accepted the role of Registrar on the AAAHP executive. His successor as President is equally as committed as he, which bodes well for the organisation – and the profession – into the future.



Ray catches up on work once the kids are in bed