



Department of Anaesthesia and Perioperative Medicine  
North Shore Hospital  
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## PAINT-2 Study

### PARTICIPANT INFORMATION SHEET

Project title: Procedural Access IN Training (PAINT-2)

#### Research Team:

Dr Navdeep Sidhu (Lead) – Consultant Anaesthetist<sup>a</sup> and Senior Clinical Lecturer<sup>b</sup>  
Dr Greta Pearce – Consultant Anaesthetist<sup>a</sup>  
Dr Alana Cavadino – Biostatistician<sup>b</sup>  
Dr Sophie Gormack – Medical Education Fellow<sup>a</sup>

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#### What does the study involve?

The Procedural Access IN Training (PAINT-2) study is a multi-centre prospective observational study of procedures performed by learners and associated levels of supervision. It is a follow-up to the PAINT-1 study published in 2020 ([Pearce, Sidhu, et al. BJA 2020; 124\(3\):e70-6](#)).

The PAINT-2 study is an observational study that requires no change to your daily practice with patients. It will involve collecting information from both supervisors and learners on procedures performed and levels of supervision, at the end of each list where a supervisor is paired with a learner. Participation is voluntary. Anyone may decline to participate or withdraw from the research at any practicable time, without experiencing any disadvantage.

We aim to evaluate access to procedures in training for different groups of learners and, if required, make recommendations to improve teaching and learning.

#### Data collection:

- Prior to the study period, you will be sent a survey link. If you are on a list paired with a supervisor/learner during the two-week study period, we ask that you complete the brief survey. We estimate that 1-2 min is all that is required.
- This survey will require information on demographics (personnel, date), type of procedure, level of supervision, and procedure complexity (supervisor only). When an individual completes the survey for the first time, two additional demographic questions are included.
- If a completed survey is not submitted, you will be sent a reminder text message with a link to the survey. If we still don't receive a reply, we may phone you to collect that information.

Participation is voluntary and you may indicate to your local Site Investigator that you do not wish to be contacted about the survey.

- All individual personal information is kept confidential. The local Site Investigator will not have access to survey results. They will however be provided feedback on compliance in order to contact non-responders. Data will not be attributed to individual hospital sites in the final multi-centre analysis. Complete survey data, visible only to the Lead Investigator, will be anonymised prior to being shared for statistical analysis and storage.

**Important Note:**

**If using a phone to complete the survey, the display requires you to scroll right to see all columns. Alternatively, turn your phone to landscape orientation.**

**Inclusion Criteria:**

- All weekday lists with a named supervisor and learner where specific procedures are performed during the study period.
- The specific procedures are:
  - Anticipated difficult airway management (steps/procedures to manage an anticipated difficult airway)
  - Neuraxial blocks (i.e. spinals and epidurals)
  - Peripheral nerve blocks
  - Central venous cannulation (including PICCs)
  - Point-of-care ultrasound (e.g. cardiac, lung, gastric)
- For the purposes of this study, registrars and SHOs (training and non-training, including from other specialties) are categorised as learners. Provisional fellows (including those in post-FANZCA fellowships) may be categorised as learners when being supervised or as specialists when providing supervision to junior doctors.

**Exclusion Criteria:**

- Procedures that are excluded from data collection, i.e.
  - Routine airway management in patients with no anticipated difficulty
  - Peripheral venous cannulation (except PICCs)
  - Arterial cannulation
  - Off-the-floor procedures (i.e. those in the labour ward or in ED)
  - Procedures performed while on call (i.e. not a named list)
- Solo lists, i.e. no paired supervisor-learner
- After-hours lists, i.e. evenings, nights, weekends
- Lists where supervisors are paired with medical students as the only learner

**Benefits and risks**

Benefits include involvement in a pioneering study on supervision in Anaesthesia. Your participation will help us identify how we may improve the supervision process during training. No obvious risks to learning, supervision, or patient care were identified in the feasibility study.

### Who pays for the study?

Participants do not incur any costs. No financial compensation is offered to participants. The study is funded by the internal resources of the Department of Anaesthesia and Perioperative Medicine, North Shore Hospital, Te Whatu Ora (Waitematā).

### Rights of the participants

- Participation is voluntary. Lack of participation will not result in any disadvantage.
- Participants have the right to withdraw from participation at any time without any disadvantage.
- Participants have the right to request withdrawal of their data from the research up to when statistical analysis is performed.
- Individual participants remain anonymous and responses are confidential, viewed only by the Lead Investigator. Results will not be collated by department.
- Training conditions will not be affected for learners who decline to participate

### What will happen after the study

- Study data will be stored digitally for 7 years in the Department of Anaesthesia and Perioperative Medicine, North Shore Hospital, Auckland.
- Study findings will be published in a peer-reviewed journal.
- Local Site Investigators will be sent a copy of the publication for dissemination in their department

### Contact details

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Dr Alana Cavadino  
Dr Sophie Gormack

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If you require Māori cultural support, talk to your whānau in the first instance. You may also contact the administrator for He Kamaka Waiora (Māori Health Team) by telephoning 09 486 8324 ext 2324, or contact the Auckland and Waitematā District Health Boards Māori Research Committee or Māori Research Advisor by phoning 09 4868920 ext 3204 to discuss any questions or complaints about the study.

For concerns of an ethical nature, you can contact the Chair of the Auckland Health Research Ethics Committee at [ahrec@auckland.ac.nz](mailto:ahrec@auckland.ac.nz) or at 373 7599 x 83711, or at Auckland Health Research Ethics Committee, The University of Auckland, Private Bag 92019, Auckland 1142.

**Approved by the Auckland Health Research Ethics Committee on 31/7/23 for three years.  
Reference number (AH25277).**

## Frequently asked questions

### 1. How do I recall all this information?

The survey will include the relevant information and definitions. The survey options are all in drop-down menu format, so you only need to select from the options that are available. Some screenshots are shown in the final pages of this information sheet.

### 2. What is meant by 'airway management' as a procedure?

We acknowledge that 'airway management' is a broad term and often a range of discrete steps is required to manage a difficult airway (e.g. appropriate positioning, bag-mask ventilation, different tracheal intubation techniques, etc). For the purposes of this study, 'anticipated difficult airway management' will encompass all steps taken to manage the airway.

### 3. How do we determine if an airway is anticipated to be difficult?

This is a subjective determination. We have defined 'anticipated difficult airway' as *'an airway predicted to be non-routine for any reason, as subjectively assessed by either the supervisor or learner, and communicated to each other as such.'*

### 4. What if multiple procedures are performed to manage an anticipated difficult airway? Do I include a separate entry for each procedure?

Only a single entry is required for each airway managed. For example, if an anticipated difficult airway included positioning for bag-mask ventilation and an asleep fibre-optic intubation, it would still be classed as a single airway management procedure and the overall level of supervision should take into account all these steps.

### 5. What if I am on a list in which multiple similar procedures are performed. For example, an elective obstetric list with three spinals.

You would then record an entry for each procedure, in the same survey. One survey is to be completed for each list, and each survey has space for up to 12 procedures. If more space is required, please let us know.

### 6. How are the levels of supervision defined?

These have been adapted from a previous study and are defined below. These definitions are also included in the survey for your reference

- Learner Watching – *supervisor performs procedure while explaining steps to learner*
- Active Help – *learner performs procedure with supervisor actively guiding learner through critical steps*
- Passive Help – *learner performs critical steps of procedure independently while supervisor passively observes, intervening only if necessary to make an important teaching point or to optimise patient safety*
- Learner Independent – *learner performs procedure independently without input from supervisor during procedure, who may or may not be present. A discussion on technique/plan may have taken place prior to the procedure*

**7. How are procedures rated for complexity?**

This information is only required of supervisors, who are asked to rate the complexity of each procedure relative to their overall experience with the procedure and any relevant patient factors. Only three options are presented: least complex one-third, average complexity, and most complex one-third.

**8. Does the supervisor and learner each submit a survey after a list?**

Yes, both the supervisor and learner each submit one survey after a list, using their own survey links. The aim is to determine what level of supervision was applied from the perspective of the respondent – this may differ between supervisor and learner.

**9. Can the supervisor and learner discuss their responses prior to the survey?**

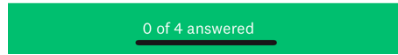
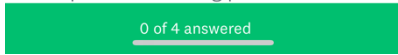
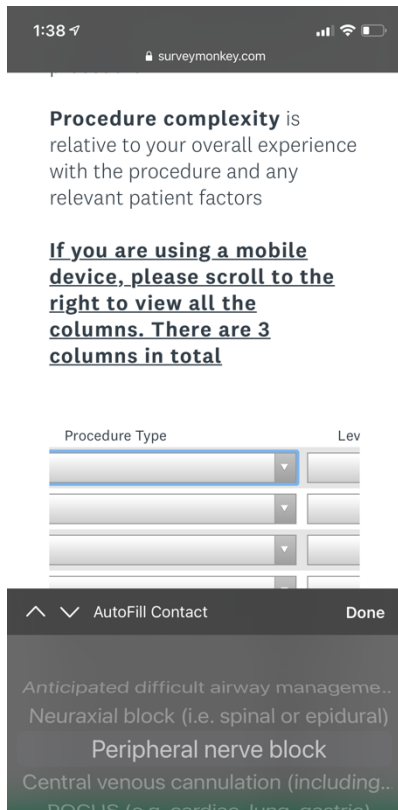
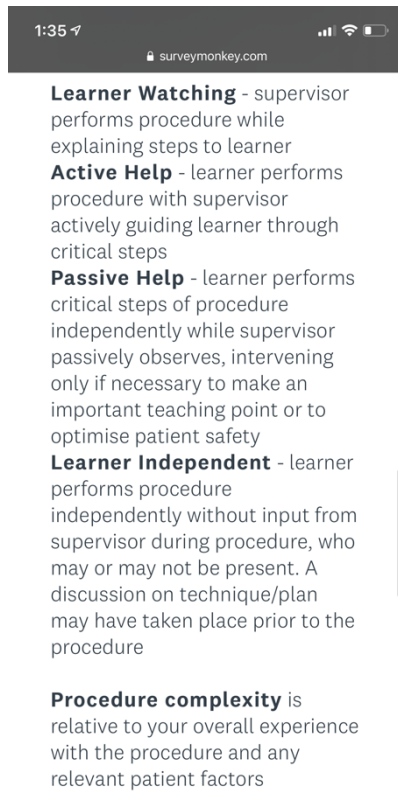
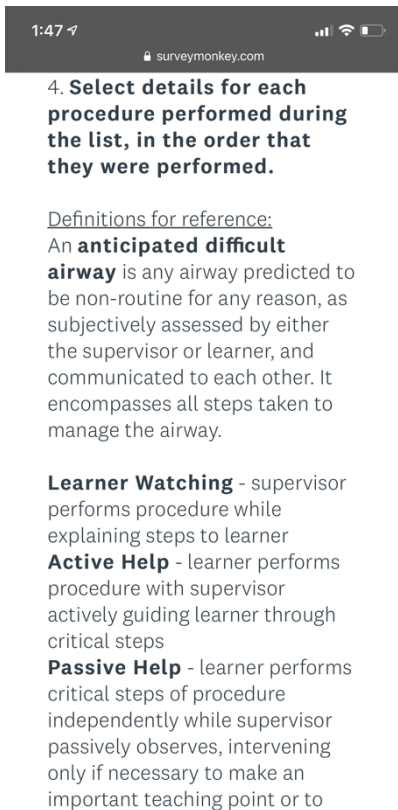
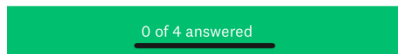
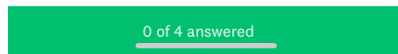
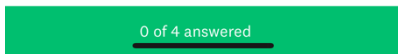
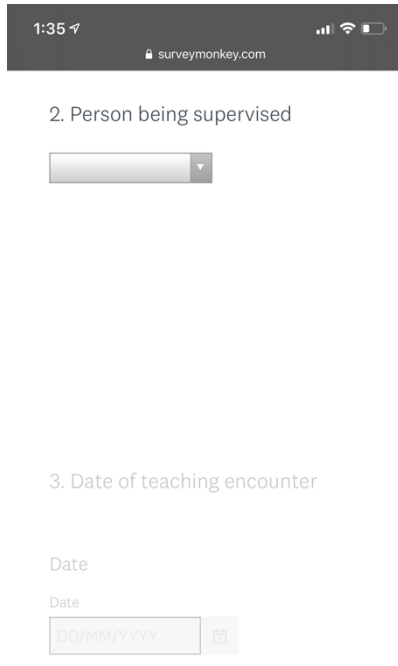
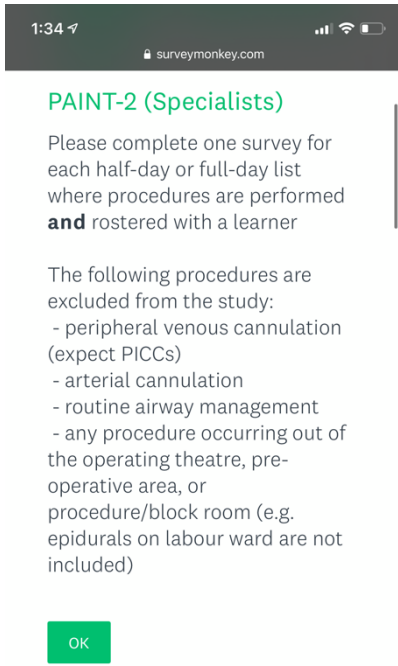
Please avoid discussion on what level of supervision was applied in order to complete the survey. However, we encourage discussion to clarify what procedures were performed in what order, and their eligibility.

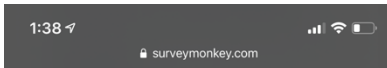
**10. In what order should procedures be entered?**

These should be entered in chronological order for each list, with the procedure done first listed first.

**11. Can I decline to participate?**

Yes, any individual can decline to participate at any time. Please inform your local Site Investigator if you intend to decline participation.





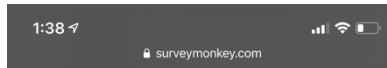
**Procedure complexity** is relative to your overall experience with the procedure and any relevant patient factors

**If you are using a mobile device, please scroll to the right to view all the columns. There are 3 columns in total**

Level of Supervision	P
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

AutoFill Contact Done

Learner Watching  
Active Help  
Passive Help  
Learner Independent



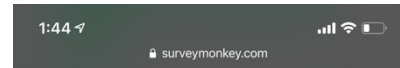
**Procedure complexity** is relative to your overall experience with the procedure and any relevant patient factors

**If you are using a mobile device, please scroll to the right to view all the columns. There are 3 columns in total**

Revision	Procedure Complexity
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

AutoFill Contact Done

Least complex one-third  
Average complexity  
Most complex one-third



**PAINT-2 (Learners)**

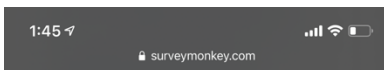
Please complete one survey for each half-day or full-day list where procedures are performed **and** rostered with a supervising clinician

The following procedures are excluded from the study:

- peripheral venous cannulation (except PICCs)
- arterial cannulation
- routine airway management
- any procedure occurring out of the operating theatre, pre-operative area, or procedure/block room (e.g. epidurals on labour ward are not included)

OK

0 of 4 answered



**Learner Independent** - learner performs procedure independently without input from supervisor during procedure, who may or may not be present. A discussion on technique/plan may have taken place prior to the procedure

**If you are using a mobile device, please scroll to the right to view all the columns. Alternatively, turn your device sideways to view in landscape mode. There are 2 columns in total.**

Procedure Type
1 <input type="text"/>
2 <input type="text"/>
3 <input type="text"/>
4 <input type="text"/>
5 <input type="text"/>

0 of 4 answered

**If you are using a mobile device, please scroll to the right to view all the columns. Alternatively, turn your device sideways to view in landscape mode. There are 2 columns in total.**

Procedure Type	Level of Supervision
1 <input type="text"/>	<input type="text"/>
2 <input type="text"/>	<input type="text"/>
3 <input type="text"/>	<input type="text"/>

0 of 4 answered

**The following questions are included in each survey (one for supervisors and one for learners) but only need to be completed once – i.e. the first time an individual completes a survey.**

5. The following two questions only need to be answered once during the study period. If you have already completed the survey once, you may skip this question and press 'DONE' below.

If you are using a mobile device, please scroll to the right to view all columns. Alternatively, turn your device sideways to view in landscape mode. There are 2 columns in total.

	Gender	Years as Consultant
Gender & Experience	<input type="text"/>	<input type="text"/>

5. The following two questions only need to be answered once during the study period. If you have already completed the survey once, you may skip this question and press 'DONE' below.

If you are using a mobile device, please scroll to the right to view all columns. Alternatively, turn your device sideways to view in landscape mode. There are 2 columns in total.

	Gender	Training Level
Gender & Experience	<input type="text"/>	<input type="text"/>

0 of 5 answered 

DONE