

RUN DESCRIPTION

POSITION:	Registrar
DEPARTMENT:	Department of Critical Care Medicine
PLACE OF WORK:	Auckland City Hospital
RESPONSIBLE TO:	Overall responsible to the Service Clinical Director, DCCM Responsible to the Duty Intensivist for the performance of day-to-day clinical duties
FUNCTIONAL RELATIONSHIPS:	DCCM patients, intensivists, nurses and ancillary staff Auckland City Hospital patients and healthcare workers outside of DCCM
PRIMARY OBJECTIVE:	To facilitate the management of patients under the care of the Department of Critical Care Medicine
RUN RECOGNITION:	Registrar posts in the DCCM are recognised for training for specialist qualifications in the following programmes: <ul style="list-style-type: none"> ➤ ANZCA training in Anaesthesia ➤ RACP training in Internal Medicine ➤ ACEM training in Emergency Medicine ➤ CICM training in Intensive Care
RUN PERIOD:	6 month rotations

Section 1: Registrars' Responsibilities

<i>Area</i>	<i>Responsibilities</i>
Patient Care and Service Delivery	<ul style="list-style-type: none"> ➤ "In" Day registrar ➤ Caring for patients already in the DCCM and admitting patients who come directly to the DCCM. ➤ Presentation of patients at ward rounds and handovers. ➤ Patient medical care planning in conjunction with the Duty Intensivist. ➤ Ensuring that the 'plans of the day' are arranged and completed and that the results of investigations are written up on the charts. ➤ General clinical duties-assessing patients, responding to nursing queries and concerns, meeting with visiting teams and coordinating care for the patient ➤ Keeping the duty Intensivist updated with changes in patients conditions. ➤ "Out" Day Registrar ➤ Attend to referrals and emergency calls outside the DCCM, and discuss unstable patients with the duty Intensivist. ➤ .Assist the DCCM "In" Registrar's with duties as able. ➤ Transport appropriate patients outside DCCM (inside ACH) for investigations. ➤ Night registrars — share the duties of "In" and "Out" Registrars. <p><i>Duties outside the DCCM include:</i></p>

<i>Area</i>	<i>Responsibilities</i>
	<ul style="list-style-type: none"> ➤ Code Blue (cardio-respiratory arrest) calls ➤ Code Red (medical emergency) calls ➤ Trauma Team calls ➤ Emergency calls to any part of the hospital, particularly in the Emergency Department ➤ Consultation on any patients with critical illness in other wards and departments ➤ Assistance with procedures in other wards and departments on occasion.
Administration	<ul style="list-style-type: none"> ➤ Maintain a satisfactory standard of documentation of patient care orders ➤ Maintain a satisfactory standard of documentation of patient admission, progress, significant events, and transfer or discharge in the clinical record ➤ Be responsible for certifying death and completing appropriate documentation, ACC forms (including treatment injury) ➤ Contribute to the DCCM Registrar teaching programme

Section 2: Training and Education

<i>Nature</i>	<i>Details</i>
<i>Orientation</i>	A series of orientation lectures are given 0800 – 1700 on the first two days of the run.
<i>Education</i>	<p>A weekly DCCM medical education session is held on Thursday afternoon 1330 – 1530h</p> <p>Monthly regional Intensive Care trainee teaching</p> <p>DCCM Morbidity and Mortality Review meetings</p> <p>The Registrar is expected to contribute to the education of nursing, technical staff and medical staff and students when requested</p>

Section 3: Roster

<i>Roster template</i>							
Hours of Work							
Day shifts	0800 - 2030 (includes handover)						
Night shifts	2000 – 0830 (includes handover)						
Short day shifts (S)	0800 – 1700 Mon – Fri						
Short Notice Relief (SNR)							
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Week 1	N	N	N	N	-	-	-
Week 2	ANL/S/SN	ANL/S/SN	ANL/S/SNR	ANL/S/SN	ANL/S/SN	ANL/SNR	ANL/SN
Week 3	-	-	-	N	N	N	N
Week 4	-	-	-	D	D	D	D
Week 5	-	-	D	D	-	-	-
Week 6	D	D	-	-	N	N	N
Week 7	-	-	-	-	D	D	D
Week 8	ANL/S/SN	ANL/S/SN	ANL/S/SNR	ANL/S/SN	ANL/S/SN	ANL/SNR	ANL/SN
Week 9	N	N	N	-	-	-	-
Week 10	D	D	D	-	-	-	-

Short day shifts will occur if less than 2 registrars are on leave; short notice relief if no registrars are on leave

Section 4: Cover:

<i>Other Resident and Specialist Cover</i>
<p>Specialist intensivists provide 24 hour 7 day cover on a rostered system. A Duty Intensivist is either at the work place or immediately available by phone and able to return to the hospital immediately on receipt of a call. There is a second intensivist rostered as backup in case of emergency or difficulty accessing the Duty Intensivist. A Fellow in Critical Care Medicine also works in a junior specialist capacity. There is no house officer.</p>

Section 5: Performance appraisal

<i>Registrar</i>	<i>Service</i>
<p><i>The Registrar will:</i></p> <ul style="list-style-type: none"> At the outset of the run meet with their intensivist mentor to discuss goals and expectations for the run After any assessment that identifies deficiencies, implement a corrective plan of action in consultation with their mentor and the other intensivists 	<p><i>The service will provide:</i></p> <ul style="list-style-type: none"> An intensivist mentor to discuss goals and expectations for the run An interim assessment for the Registrar approximately three months into the run The opportunity to discuss any deficiencies identified during the attachment A final assessment report on the Registrar at the end of the run, a copy of which is to be sighted and signed by the Registrar

Section 6: Hours and Salary Category

<i>Average Working Hours</i>		<i>Service Commitments</i>
Basic Hours (Mon-Fri)	40	The DCCM will be responsible for preparation of the registrar roster
Rostered additional hours (inc. nights, weekends & long days)	3.8	
All unrostered hours	2.0	
Total hours per week	45.8	

Salary: The salary for this attachment is estimated to be a category **E** (paid a minimum of a **C**). Relief duties will be remunerated at an **A** category.