

RUN DESCRIPTION

POSITION:	Registrar 2 nd year +	
DEPARTMENT:	Mental Health	
PLACE OF WORK:	Rapua Te Ao Waiora CMHC	
RESPONSIBLE TO:	General Manager and Clinical Director, Mental Health Services through the Clinical Lead, supervising Consultant and Team Manager, Rapua Te Ao Waiora.	
FUNCTIONAL	Health care clients, Hospital & Community based health care workers,	
RELATIONSHIPS:	NGO's and GP's.	
NATURE OF ATTACHMENT:	The attachment is to a multidisciplinary team. At times this may include medical students	
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PRIMARY OBJECTIVE:	To facilitate the management of clients who are living in rural areas of Papakura and Franklin and are under the care of Rapua Te Ao Waiora community Mental health team	
RUN RECOGNITION:	This attachment is recognised by RANZCP as a training position for specialist qualification.	
Run Period	6 Months	

Section 1: Registrar's Responsibilities

Area	Responsibilities	
General	Clinical Duties: • The Registrar is responsible to his/her supervising Consultant for the care and management of clients in their service area.	
	 In order to provide experience working in an integrated service model the Registrar may at times be involved in inpatient care of The Rapua Te Ao Waiora team clients although clinical duties will focus primarily on community care. 	
	The Registrar will be available to attend the weekly multidisciplinary team meeting and will be available each day for a 'handover' meeting with crisis staff and other members of the team. The registrar will have a current knowledge of the progress of clients under his/her care.	
	The Registrar will ensure that the Consultant is informed of all significant events in the course of the care of clients under his/her care. (e.g. absence from treatment or unexplained absence from usual domicile, change in mental state, unusual laboratory findings, non-concordance with treatment, etc) as well as any unusual peaks in workload and will update the Consultant on any significant changes in client management. Registrars will also ensure that arrangements are made for medical care of clients	

Area	Responsibilities			
	allocation of clinical duties and share the workload when it is uneven and busy. This is to provide optimal registrar support and responsiveness to clients.			
	A call should routinely be made during the course of the duty (evenings and weekends) from the Registrar to inform the on-call psychiatrist of events which occur during the period of after hours duty. Issues to be discussed would include, but may not be limited to:			
	 new assessments made in the emergency department, where the person is not admitted admissions current inpatients who wish to discharge themselves against 			
	 advice current inpatients who are absent without leave, and who are categorised as "A" category AWOL (or for whom no categorisation has already been determined) 			
	 assessments made of people referred from within the general hospital wards other clinical problems requiring consultant support, as determined by the level of experience of the registrar 			
	 All calls in relation to children or adolescents will be discussed with the on-call Child Psychiatrist for the region 			
	 At all changes of duty adequate handover will be given to the incoming Registrar in relation to matters arising on call. 			
Administration	 Maintenance of comprehensive documentation in clinical files, including: letters to other health professionals or agencies regarding assessments and treatment processes timely discharge summary letters medication orders, including prescriptions, medication updates and reasons for changes Completion of any special documentation or database entry of health information as required by the Unit Consultant or Manager Participation in weekly team case conferences Follow up laboratory and other investigations as necessary, using electronic systems and other records as appropriate Check and attend to email correspondence on CMDHB email account in a timely manner Obtain informed consent for procedures within the framework of the Medical Council guidelines (see footnote 1) Contact the Team Manager/Service Manager to report any unplanned absences. In consultation with the Clinical Director, assist with operational 			
	research in order to enhance the performance of the Service.			

Footnote 1The practitioner who is providing treatment is responsible for obtaining informed consent beforehand for their patient. The Medical Council believes that the responsibility for obtaining consent always lies with the consultant – as the one performing the procedure, they must ensure the necessary information is communicated and discussed. Council believes that obtaining informed consent is a skill best learned by [the house surgeon] observing consultants [and experienced registrars] in the clinical setting. RMOs [Probationers] should not take informed consent where they do not feel competent to do so.

Section 2: Training and Education

Nature	Details			
Protected Time	The following educational activities will be regarded as part of normal duties (unless attendance is required for other duties as per roster)			
	Orientation at the beginning of the run			
	Participation in the Registrar teaching programme, one full day per week during the academic semester [day dependent on registrar training year] as scheduled by the Regional Training Committee. When there is no scheduled programme, registrars are expected to attend to clinical duties unless otherwise negotiated with their supervising psychiatrist.			
	 Attendance and participation at other service and unit based education sessions as scheduled, including Monday Journal Club. This will include at least one presentation by the registrar during the course of the rotation, in accord with current standards for such presentations and in conjunction with the supervising psychiatrist. 			
	Participation in weekly Registrar group meetings with the Training Facilitate or Clinical Director			
	• Attendance at least I hour of individual supervision (2 hours if first year trainee) each week with the supervising Psychiatrist, at a time to be arranged with the Psychiatrist. At least 4 hours of supervision of clinical practice will be provided each week.			
	Time will be given to enable participation in preparation to fulfil the examination requirements for FRANZCP Basic and Advanced training.			
Training and development activities	Opportunities are available for ECT trainingA research project may be undertaken during the attachment, subject to the approval of the Clinical Director - Mental Health and Ethics Committee			
Training and development of other staff	Through example and supervision the Registrar will actively contribute to the education of House Officers, Trainee Interns and medical students when allocated to them.			
	 The Registrar is expected when possible to provide education and/or training for staff of other disciplines in relation to aspects of medical/psychiatric assessment and treatment, within the service setting. 			

On-Duty

The Registrar will be rostered on either "A" or "B" long day duty, or "N" Night duty, or is on a rostered off duty "Z" sleep day on the CMDHB Mental Health Service roster.

"A" Long Day Duty

The "A" Registrar sees all inpatients at Middlemore Hospital including Tiaho Mai, Ward 35 East – Koropiko, any other hospital ward and all Middlemore Hospital ED patients. The Registrar is on duty and based at Middlemore Hospital.

"B" Long Day Duty

The "B" Registrar sees all community presentations including to the New Zealand Police at Manukau Hub or other Police station and inpatients at Tamaki Oranga. The Registrar is on duty and based at Intake and Assessment and Home Based Treatment at Kerrs Rd, Manukau.

"N" Night Duty

The "N" Registrar covers all after-hours duties described above for the A and B Registrar. The registrar is on duty and based at Middlemore Hospital.

"Z" Sleep Day

Not at work.

Section 3: Roster

Roster

There are 14 Registrars & 2 relievers on the roster.

- Normal working hours are 8 hours between 0830 and 1630, Monday to Friday.
- Additional rostered hours are from 1630 2300 weekdays and 0830 to 2300 at weekends and public holidays. There is allowance for handover from 2230 to 2300 hours.
- Night duty is from 2230 to 0830 hours. Night duties are worked in separate periods of Three and four nights.
- It is expected that registrars work collegially with a spirit of co-operation and flexibility in the allocation of clinical duties. This is to provide optimum registrar support and responsiveness to clients.
- On weekends and public holidays from 0830-1630hrs a Senior Medical Officer is rostered to
 cover the Inpatient Wards. The SMO's responsibilities are to undertake duties that are
 otherwise the responsibility of the on duty Registrars. The on duty registrars are not expected
 to undertake tasks on the Inpatient unit during these hours unless the rostered SMO is
 unavailable.

Final Year Advanced Trainees may be supported in taking on roles with additional responsibilities consistent with the training requirements of The Royal Australian & New Zealand College of Psychiatrists to assist with the transition to Consultant role once fellowship is obtained. This may include duties after hours on the Consultant roster supported and buddied by a Consultant colleague. This will be negotiated and discussed with the Registrar on a case by case basis.

Section 4: Cover

Other Resident and Specialist Cover

Cover for weekly teaching days, planned and unplanned leave will be approved and arranged by agreement within the service.

There is an expectation that leave applications are submitted to Team Manager/Service Manager well in advance.

Education leave to attend conferences or for study and exam purposes is granted in accordance with the provisions of the collective employment contract which includes adequate cover being arranged

Section 5: Performance appraisal

Registrar	Service	
The Registrar will: Ensure they arrange a formal meeting with their supervising consultant at the outset of the run to discuss goals and expectations for the run, review and assessment times and one on one teaching time Ensure review meetings are set at three months and six months to review progress against goals and expectations Implement a corrective action plan under the advice of their Consultant where any deficiencies are identified	 An initial meeting with a nominated Consultant (who will usually be the designated Supervisor) and Team Manager/Service Manager to discuss goals and expectations for the run, review and assessment times and one on one teaching time. An interim assessment report on the Registrar three months into the run, after discussion between the Registrar, designated supervisor and Team Manager/Service Manager. The opportunity to discuss any deficiencies identified during the attachment. The designated supervisor will bring these to the Registrar's attention and discuss and implement a plan of action to correct them. If required the Training Facilitator will be involved. 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

Average Working Hours		Service Commitments
Basic hours (Mon-Fri)	40	
Rostered additional hours (inc. nights, weekends & long days)	13.28	
All other unrostered hours	2.58	
Total hours per week	55.86	

Salary: The salary for this attachment is estimated to be a Category C