

RUN DESCRIPTION

POSITION:	Registrar
DEPARTMENT:	Otolaryngology – Head and Neck Surgery
PLACE OF WORK:	Auckland City Hospital / Greenlane Clinical Centre
RESPONSIBLE TO:	Clinical Director , ORL, ADHB.
FUNCTIONAL RELATIONSHIPS:	Healthcare consumers, Hospital and community based healthcare workers
PRIMARY OBJECTIVE:	To facilitate the management of patients under the care of ORL
RUN RECOGNITION:	The run for the SET trainee is recognised by the RACS as a training position for specialist qualification. The run for the Non-SET trainee is not recognised as a training position.
RUN PERIOD:	6 months

Section 1: Registrar’s Responsibilities

<i>Area</i>	<i>Responsibilities</i>
General	<ul style="list-style-type: none"> • The Registrar will supervise the work of a House Officer, with whom they will organise the investigation and management of patients under the care of the Department. • The Registrar will be available to attend Consultant ward rounds and will have a current knowledge of the progress of inpatients under their care, and liaise with the Consultant as necessary. When on-call, the Registrar will answer calls by General Practitioners about patients and arrange to assess them as necessary. • The Registrar will attend rostered outpatient clinics promptly and will endeavour to see outpatients at their scheduled appointment times. Outpatients not previously seen in the Department, or who are to be discharged, will be discussed with a Consultant. Acute patients presenting to Outpatient Clinic must be assessed within a reasonable time. • Clinical skills, judgement and knowledge are expected to improve during the attachment. • Legible notes will be written in patient charts on admission and whenever management changes are made. • A letter to the patients’ General Practitioner will be dictated after their discharge from hospital. • The Registrar is responsible for the completion of death certificates for patients who

Area	Responsibilities
	<p>have been under their care, although this may be delegated to a House Officer.</p> <ul style="list-style-type: none"> • Letters will be written to the patients' General Practitioner after each outpatient visit. The results of all investigations will be sighted and signed or electronically accepted into the patients' chart. • Maintain a high standard of communication with patients, patients' families and staff; • Inform Consultants of the status of patients especially if there is an unexpected event; • Attend hand-over, team and departmental meetings as required.
Admitting	<ul style="list-style-type: none"> • Assess and admit ORL patients referred by ED, from the community or from other DHB's.
Acute call	<ul style="list-style-type: none"> • When rostered on duty to cover ORL acutes, the Registrar will answer calls from GPs about patients and arrange to assess them if necessary. Acute call will be shared between all Registrars who will be contributing to the acute calls. • Provide advice to and liaise with GP's and other hospital medical staff on ORL matters; • Authorise patients to be transferred to and be seen by the ORL service when appropriate
Inpatients	<ul style="list-style-type: none"> • When allocated ward duties within the service undertake regular examination management of, and updating of management plan of admitted patients for whom the team is responsible on a frequency agreed with the Clinical Director; • Ensure relevant documents, e.g. discharge summary, medication card and follow-up appointments are given to patient on discharge as necessary. • Ensure weekend plans for patient's management are documented in the notes; • When not on duty on Friday evening or the weekend, inform the on-duty medical staff about patients whose condition requires monitoring and review; • Complete documentation on Friday prior to known or likely weekend discharges.
Outpatients	<ul style="list-style-type: none"> • Assess and manage patients referred to outpatient clinics and run the clinics on behalf of senior staff where appropriate • Communicate with referring person following patient attendance at clinics; • Arrange and perform outpatient investigations where appropriate
Administration	<ul style="list-style-type: none"> • Maintain a satisfactory standard of documentation in the files of patients. All prescriptions and notes are to be signed, with a printed name and locator number or phone number legibly recorded; • Be responsible for certifying death and complete appropriate documentation; • At the direction of the Clinical Director, assist with operational research in order to enhance the performance of the Service; • Dictate discharge summaries on patients that are discharged by their team and letters to General Practitioners following outpatient visits in a timely fashion; • Obtain informed consent for procedures within the framework of the Medical Council guidelines which state: <ol style="list-style-type: none"> 1. <i>"The 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."</i> 2. <i>"Council believes that obtaining informed consent is a skill best learned by the House Surgeon observing Consultants and experienced Registrars in the clinical setting. Probationers should not take informed consent where they do not feel competent to do so."</i>

Section 2: Training and Education

Nature	Details
Protected Time	<p>The following educational activities will be regarded as part of normal duties (unless attendance is required for other duties as per roster)</p> <ul style="list-style-type: none"> • Orientation at the beginning of the run • There will be a minimum of 3 hours per week of education sessions. The clinical meetings include the Journal Club, the Radiology Conference, Pathology Conference and include department seminars and audit meetings and morbidity & mortality meetings. • There will be 3 hours teaching on Friday afternoons for Registrars. <p>Timing of educational sessions is subject to change</p>
<p>Through example and supervision the Registrar will actively contribute to the education of House Officers. The Registrar will be expected to teach other health care workers and medical students.</p>	

A research project undertaken during the attachment subject to approval by the Clinical Director is encouraged.

Section 3: Cover

Other Resident and Specialist Cover
<p>There are ten ORL Registrars employed in the Auckland region, including one Reliever. The Registrars are employed across the three Auckland DHB's; Auckland, Waitemata and Counties Manukau. The Registrars contribute to a regional Acute Call roster which requires them to be on site at Auckland City Hospital between the hours of 1600 and 0800 Monday to Friday, and 0800-0800 hours Saturday and Sunday when rostered on a long day or night duty.</p> <p>The ordinary hours of work will be 0730 hours to 1600 hours, Monday to Friday. Additional hours of non-rostered work, up to 5 hours per week, may be required during weekdays. In addition, Saturday morning ward rounds may be required and will be remunerated as additional duties.</p>

Section 4: Roster

Hours of work		
Ordinary Hours	Monday to Friday	0730 – 1600
Acute Call: Long Day	Monday to Friday	0730 – 2230
Acute Call: Long Day	Saturday and Sunday	0800 – 2230
Night Duty	Sun to Thurs	2200 – 0800
Night Duty	Fri and Sat	2200 – 0830
<p>Acute call between the hours of 1600 and 0800 Monday to Friday, and 0800 and 0800 hours Saturday and Sunday, provides cover for GLH, Starship, AKH, North Shore, Waitakere, MMH and MSC as part of the Regional ORL service.</p>		
<p>When rostered on acute call during these hours Registrars are required to be on-site at Auckland City Hospital.</p>		
<p>The Regional ORL Acute roster is managed by the Northern Regional Training Hub in conjunction with ADHB ORL Service.</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 designated consultant to discuss goals and expectations for the run, review and assessment times, and one on one teaching time After any assessment that identifies deficiencies, implement a corrective plan of action in consultation with their Consultant; 	<p><i>The service will provide,</i></p> <ul style="list-style-type: none"> An initial meeting between the Consultant and Registrar 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 (3) months into the run, after discussion between the Registrar and the Consultant responsible for them; The opportunity to discuss any deficiencies identified during the attachment. The Consultant responsible for the Registrar will bring these to the Registrar's attention, and discuss and implement a plan of action to correct them; 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	<p>The Service, together with RMO Support will be responsible for the preparation of any Rosters.</p>
Rostered additional hours (inc. nights, weekends & long days)	15.25	
All other unrostered hours	10.38	
Total hours per week	65.62	

Salary The salary for this attachment is estimated to a Category A .