

RUN DESCRIPTION

POSITION:	Palliative Medicine Registrar (Advanced Trainee)
DEPARTMENT:	Palliative Care Team, Division of Medicine, Middlemore Hospital and Totara Hospice South Auckland, Manurewa
PLACE OF WORK:	Middlemore Hospital, Totara Hospice South Auckland
RESPONSIBLE TO:	Clinical Head Palliative Care, Division of Medicine, Middlemore Hospital and Clinical Director Totara Hospice South Auckland
FUNCTIONAL RELATIONSHIPS:	Healthcare consumers, Middlemore Hospital, Totara Hospice South Auckland and community based healthcare workers
PRIMARY OBJECTIVE:	Involvement in medical management of patients referred to Palliative Care Services. To fulfil the Hospital Palliative Care and In-patient/Community Hospice compulsory module requirements for advanced training in Palliative Medicine.
RUN RECOGNITION:	This run is recognised by the RACP and Australasian Chapter of Palliative Medicine as a training position for specialist qualification
RUN PERIOD:	This run description applies to runs of either 6 or 12 months duration

Background:

The Middlemore Hospital Specialist Palliative Care Service (SPCS) and Totara Hospice South Auckland provide 'specialist' palliative care support in Counties Manukau Health (CMH).

The SPCS is a subspecialty in the Division of Medicine and is located in Middlemore hospital. Totara Hospice South Auckland is a free-standing facility providing a range of palliative care services, located at 140 Charles Prevost Drive, Manurewa.

The SPCS is a medical and nursing consultancy service providing "specialist palliative care" to inpatients of Middlemore Hospital. Patients eligible for specialist palliative care include those with active, progressive advanced disease for whom the prognosis is limited and the focus of care is quality of life *and* who have a level of need that exceeds the palliative resources of the primary team. These patients have a breadth and depth of need over and above the "ordinary". Extraordinary needs can be patient, carer or health team centred and the support required may be intermittent or continuous depending on the level of need and the rate of disease progression. Eligibility is based on need not diagnosis, and patients with either malignant or non-malignant diseases qualify for palliative care.

Totara Hospice South Auckland provides specialist palliative care services by a range of healthcare professionals (including doctors, nurses, and counsellors) both on an in-patient and out-patient basis within a defined geographical area of South Auckland. The advanced trainee will be working in both the in-patient hospice setting and for patients at home/residential care during the attachment.

Team members interface closely with other members of the multidisciplinary team in order to ensure that patients receive multi-dimensional care appropriate to their current needs. These needs may include elements within physical (tinana), psychological (hinengaro), social (whānau) or spiritual (wairua) domains.

The services have close links with community services (other hospices, PHO's, cancer society, district nursing services) providing palliative care. Liaison with these services and the patient's general practitioner (GP) are routine.

Section 1: Registrar's Responsibilities

<i>Area</i>	<i>Responsibilities</i>
General	<ul style="list-style-type: none"> • Understand the philosophy and objectives of Palliative Care and the Palliative Care Service and set goals for practice within this framework • Work in a manner that demonstrates an awareness of and sensitivity to cultural diversity and the impact that may have on health goals unique to that patient. This requires an understanding of Māori health goals and working in accordance with the principles of the Treaty of Waitangi. It also requires an understanding of the different health needs of other cultural groups, including needs that may be specific to Pacific Island and Asian peoples. • Work closely with members of the multidisciplinary team in provision of care for palliative patients referred to both the Palliative Care Service in Middlemore Hospital and in-patients and community patients of Totara Hospice South Auckland • Work closely with members of the multidisciplinary team in provision of management, including ordering appropriate investigations, for patients referred to the Totara Hospice South Auckland outpatient clinics • Develop and implement management plans for palliative patients referred to the Middlemore Hospital SPCS and Totara Hospice South Auckland in collaboration with the patient, family, whānau and other members of the multidisciplinary team • Undertake diagnostic and treatment procedures appropriate to the subspecialty • Monitor and review management plans in accordance with changes in the clinical condition of patients • Maintain a high standard of communication with patients, patients' families and whānau • Maintain a high standard of communication with hospital and community health professionals and other staff. • Participate in review of patients referred to the Palliative Care Service and Totara Hospice South Auckland in conjunction with the multidisciplinary team • Inform the Hospital SPCS/Totara Hospice South Auckland SMO of the status of patients especially if there is an unexpected event • Attend scheduled paper case reviews, team and departmental meetings.
Inpatients	<ul style="list-style-type: none"> • Undertake comprehensive assessments of patients both initial and then as a follow-up if indicated. After assessment develop appropriate management plans for in-patients referred to the Middlemore Hospital SPCS and in-patients at the Totara Hospice South Auckland. • Discuss new assessments, management plans and clinical problems with Palliative Care Consultant (SMO) responsible for clinical work that day • Respect responsibility of generalist ward teams and Primary Care teams managing the patient and discuss all recommendations with that team • Document assessment summaries and management plans in patients' clinical notes

<i>Area</i>	<i>Responsibilities</i>
	<ul style="list-style-type: none"> • Ensure palliative care records including discharge summary are forwarded to community palliative care providers and the patient's GP on discharge of the patient from the Hospice in-patient unit. • Ensure palliative care records including discharge summary are forwarded to community palliative care providers and patient's GP prior to discharge of patient from the service if weekend discharge is anticipated. • Ensure weekend and overnight palliative management plans are documented in the notes
Outpatients	<ul style="list-style-type: none"> • Assess and develop management plans for palliative patients referred to outpatient clinics • Communicate with referring person and other relevant community services following patient attendance at clinics • Arrange and perform outpatient investigations and appropriate follow-up • Document assessment summaries and management plans and insert in patient's clinical notes. Forward to patient's GP and to other relevant community services following patient attendance at clinics
Community Care patients	<ul style="list-style-type: none"> • Assess patients and develop care plans for palliative patients in the community setting in consultation with the hospice community care nurses and the General Practice teams. This may involve outpatient investigations and follow-up visits. • The care plans will be discussed with the referring person(s) and a team approach to care will be fostered • The care plans will be documented in the patient records and a copy will be sent to the referral source and other services involved in the patient care.
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 legibly recorded • Participate in research and audit as agreed with training supervisor

Section 2: Weekly Schedule

The Registrar's ordinary hours of work are Monday – Friday 0800 – 1700. This includes a 30 minute paid lunch break. There is consultant presence during these hours.

During the attachment with the Middlemore Hospital SPCS, there is no on-call commitment.

When the registrar is at the Totara Hospice South Auckland the registrar will participate in a 1:5 after hours first call roster. This will normally involve one night per week (1700 – 0800) and one weekend in five (1700 Friday to 0800 Monday). The Registrar will be available by telephone for occasional call back outside these hours.

There is a 1:5 rostered requirement for attendance in the hospice for a ward round 0800-1200 on Saturday and Sunday mornings.

The scheduled activities are shown below. In addition to activities shown in the weekly schedules (timetabling of which may be subject to change) the registrar will be allocated to clinical activities, non clinical activities and four hours per week of protected training time. Timetabling of SMO rounds, clinical activities, non clinical activities and protected training time may be subject to change.

	Monday	Tuesday	Wednesday	Thursday	Friday
a.m.	0900 - 1230 Clinical Work	0900-1000 multidisciplinary team meeting IPU hospice Clinical work	0800 – 0830 paper round Clinical work	0800 – 0830 paper round 0730 – 0830 Monthly Breakfast peer group hospice meeting	0830 – 0900 paper round Clinical work
p.m.	Clinical work	1400-1600 Hospital MDT rounds	1400-1500 MDT meeting with community care team	1215 – 1315 Grand Round hospital	Clinical work

Clinical activities may include outpatient & other clinics, home visits, ward rounds, ward work, reading and responding to patient referral letters, grand rounds, multi-disciplinary meetings, audit and quality assurance activities, case conferences and reviews, research and study related to the treatment of a specific patient, telephone and other ad hoc consultations, discussions and meetings with care givers and patients' families, preparation of reports to General Practitioners, other HCP's and official bodies..

Non - clinical activities may include teaching - (including preparation time), educational or personal supervision, service or department administration, research, planning meetings, preparation of educational resources, preparation of clinical resources.

Section 3: Cover

There is one registrar on this run and there is a consultant available on 2nd call during the hospice on call duty hours.

Section 4: Training and Education

<i>Nature</i>	<i>Details</i>
Protected Training Time	Protected training time of 4 hours per week will be allocated for CME, professional self development, medical learning and to attend teaching sessions with training supervisor. This will include time for attendance at journal club
The Registrar is expected to contribute to the education of nursing, technical staff and medical staff when requested	

Section 5: Performance appraisal

<i>Registrar</i>	<i>Service</i>
<ul style="list-style-type: none"> At the outset of the run meet with their supervising consultant to discuss goals and expectations for the run, and arrange times to review this After any appraisal that identifies deficiencies, implement a corrective plan of action in consultation with their supervising consultant 	<ul style="list-style-type: none"> The service will provide a suitable work and training environment that will foster excellence in patient care and support high quality education. An initial meeting between the supervising consultant (or designated consultant if supervising consultant is not available) and registrar will be arranged to discuss goals and expectations for the run, review and assessment times. An interim assessment report will be provided midway through the run after discussion between the registrar and the supervising consultant (or designated consultant if supervising consultant is not available). For 12 month runs, assessment's would occur every 3 months A final assessment report will be provided at the end of the run, a copy of which is to be sighted and signed by the registrar. The opportunity to discuss any deficiencies identified during the attachment will be available at any time. The supervising consultant (or designated consultant if supervising consultant is not available) in conjunction with the registrar will discuss and implement a plan of action to correct identified deficiencies.

Section 6a: Hours and Salary Category while on Totara Hospice attachment

<i>Average Working Hours</i>	<i>Service Commitments</i>
Basic hours (Mon-Fri) 40	
Rostered additional Including weekend ward round (Hospice) 8.2	
Unrostered hours 2	
Total hours 50.2	
As part of the hospice on call roster you will also be paid a fortnightly telephone allowance.	

Salary: The salary for this attachment will be detailed as a Category D run.

Section 6b: Hours and Salary Category while on Middlemore Hospital SPCS attachment

<i>Average Working Hours</i>		<i>Service Commitments</i>
Basic hours (Mon-Fri)	40	
Rostered Additional	5	
Unrostered hours	0.13	
Total hours	45.13	

Salary: The salary for this attachment will be detailed as a Category E run.