

RUN DESCRIPTION

POSITION:	Adult Neuro Rehabilitation/Geriatrics Rehabilitation Registrar
DEPARTMENT:	Adult Rehabilitation and Health of Older People
PLACE OF WORK:	Adult Neuro Rehabilitation/General Rehabilitation/Geriatrics Rehabilitation (Ward 23, Middlemore Hospital)
RESPONSIBLE TO:	Service Managers and Clinical Director through their supervising Consultants and Clinical Head.
FUNCTIONAL RELATIONSHIPS:	Health care consumers Hospital and community based health care workers
PRIMARY OBJECTIVE:	To facilitate the management of patients under the care of the Rehabilitation Medicine and Geriatrician Senior Medical Officers
RUN RECOGNITION:	This run is recognised by the AFRM (Australasian Faculty of Rehabilitation Medicine) and Australasian College of Physicians as a training position for specialist qualification in Rehabilitation Medicine and Geriatric Medicine
RUN PERIOD:	6 months

Section 1: Registrar's Responsibilities

<i>Area</i>	<i>Responsibilities</i>
Clinical Duties	<ul style="list-style-type: none"> • This registrar in this position works with the Adult/Neuro Rehabilitation Consultant and the AT&R Geriatrician in management of the rehabilitation patients on Ward 23, Middlemore Hospital. • The Registrar will ensure that all inpatients are reviewed and discussed with the consultant, the interdisciplinary team including nursing staff, and are seen daily during the week and as required. Some of these duties may be delegated at appropriate times to the House Officer. Both the Adult/Neuro Rehab service and the AT&R Geriatric service have assigned house officers who work with the registrar and one consultant. • The Registrar will be available to attend consultant ward rounds and will have a current knowledge of the progress of inpatients under their care. The Registrar is also expected to perform an independent weekly ward round along with the house officer and report back to the Consultant for advice. • The Registrar will answer calls from GP's, consultants and patients in the community and arrange to assess patients if necessary. This may include seeing referrals at other hospitals in the Auckland region. • The Registrar will attend rostered outpatient clinics at Counties Manukau Health, if required under supervision and will endeavour to see outpatients at their scheduled appointment times.

Area	Responsibilities
	<ul style="list-style-type: none"> • The Registrar is expected to assess patients in Emergency Department for the Geriatrician service and in acute wards for both services prior to transfer to Ward 23. <p>Clinical skills, judgement, knowledge and a holistic patient-centred, goal-centred approach of rehabilitation are expected to improve during the attachment.</p> <ul style="list-style-type: none"> • The Registrar is expected to attend weekly interdisciplinary (IDT) case conferences, and run family and other team meetings in Ward 23 • Minor surgical procedures as well as injection techniques may be performed under consultant supervision as indicated. • The Registrar is expected to provide help to his/her colleagues in the ARHOP (Adult Rehab and Health of Older People) Department if required, during busy times.
Administration	<ul style="list-style-type: none"> • The Registrar and house officer are responsible for timely completion of the electronic discharge letter on discharge or death of each patient, recording principal and secondary diagnoses and treatment and procedures performed. • The Registrar is also responsible for the completion of death certificates for patients who have been under their care - this may be delegated to the house officer. • The Registrar will be expected to participate in audit programmes within rehabilitation services and, in particular, will be responsible for completion of a mortality audit form for each patient dying under his/her care and presenting this to the consultant. • A letter will be written to the patient's GP after each outpatient visit. The results of all investigations will be sighted and signed, and if necessary acted on before they are filed in the patient's chart. • Every new admission will have the resuscitation status clearly documented, after discussion with the patient or the patient's POA, and signed by the registrar on the appropriate forms in accordance with clinical board policy. When unsure the case will be discussed with the supervising consultant. • Obtain informed consent for procedures within the framework of the Medical Council guidelines which state: <ol style="list-style-type: none"> 1) "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." 2) "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." • If absent due to unexpected circumstances (e.g. health, other), contact the RMO Support Unit or, if after hours the Duty Manager directly as well as the Consultant to which the registrar is clinically responsible in the absent duty • As an RMO working at CMDHB you will be provided with a Concerto login and a CMDHB email account which will be used for all work related communication. It is your responsibility to ensure you check this regularly

Section 2: Time Table

	Monday	Tuesday	Wednesday	Thursday	Friday
a.m.	0815 ATR admissions mtg 0900 – 1200 ANR Consultant Rounds	0815 ATR admissions mtg 0830-1000 Geriatrician Consultant Rounds 1000-1100 Geriatric IDT	0815 ATR admissions mtg 1100-1200 Stroke Ward IDT	0815 ATR admissions mtg 0900-1200 ANR Consultant Rounds	0815 ATR admissions mtg 0830-0930 Xray conference 0930-1200 Geriatrician Consultant Ward Rounds
			1200-1300 Geriatrician Teaching	1215-1315 Grand Rounds	
p.m.	1300-1230 ANR IDT Referrals ANR Consultant discussion	1300-1600 Geriatrician Consultant Rounds & Referrals	Referrals: Stroke and ANR Family Meetings	1315-1600 ANR Registrar Outpatient Clinic	Registrar & House Officer [Geriatric/ANR] rounds, ward work & Weekend plan & handover 3pm-4pm Rehabilitation Medicine Teaching via teleconference or on site at MMH, ASRU, Rehab Plus or ABI Rehab (from December)
		First Tuesday of every month Rehabilitation Medicine Journal Club 5:30-7:00pm	Last Wednesday of every month Bi-National AFRM Teaching 5-7pm		

Education

On occasion, the Registrar may be requested to teach nursing staff, allied health and medical students and participate in departmental teaching sessions. There will be a minimum of 4 hours of educational sessions per week which includes specialist AFRM Registrar training at a number of sites, weekly Radiology Meeting, weekly Medical Grand Rounds at Middlemore Hospital, attendance at the monthly bi-national AFRM video/teleconference, and other relevant meetings when clinical duties allow within the Auckland region as well as self-directed learning.

The registrar will be encouraged and supported to attend formal training sessions of the AFRM held in New Zealand whenever possible. This may extend to attendance at national conferences and teaching sessions and conferences in Australia with relevance to the field of Rehabilitation Medicine as part of their training requirement.

Research

A research project or document audit may be undertaken during the attachment subject to approval by the Clinical Heads of Rehabilitation and/or Health of Older People.

Section 3: Roster

<i>Roster</i>
<p>The normal hours of work are from 0800 to 1630, Monday to Friday. In addition, the Registrar will participate in the Auckland Spinal Rehabilitation Unit (ASRU) weekend and after hours On-Call roster on a 1:4 to 1:5 frequency, (Mon – Fri 1630 – 0800 (next day), Sat / Sun /public holidays -24 hr On-call cover). Reimbursement is given for phone consultations, patient attendance at ASRU and mileage.</p> <p>A supervising rehabilitation medicine consultant is always available for telephone consultation during call.</p>

Section 4: Cover

<i>Other Resident and Specialist Cover</i>
<p>The service must provide internal cover for any absence from work; for planned annual leave as well as study and sick leave. Leave cover is arranged on a "first come first served" basis and applications for annual leave/study leave should be submitted as early as possible to provide the service and consultant reasonable notice to ensure coverage. Covers for annual leave will be negotiated prior to leave being approved.</p> <p>All leave and sick absence is covered within the Department.</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; • Ensure a mid run assessment is completed after discussion between the Registrar and the consultant responsible for them; • After any assessment that identifies deficiencies, implement a corrective plan of action in consultation with their Consultant; • Sight and sign the final assessment report provided by the service. 	<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 six (6) weeks 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	The Service will be responsible for the preparation of any Rosters.
Rostered additional hours (inc. nights, weekends & long days)	5.5	
All other unrostered hours	0	
Total hours per week	45.5	

Salary The salary for this attachment will be as detailed in an **E** Run Category plus On Call Arrangements and Call-in as required.