

RUN DESCRIPTION

POSITION:	Registrar
DEPARTMENT:	Older Adults Service
PLACE OF WORK:	Waitakere Hospital
RESPONSIBLE TO:	Assigned Consultant, Clinical Director and Operations Manager within the Older Adults service.
FUNCTIONAL RELATIONSHIPS:	Consultants and Registrars in the Older Adults Service, Medical Service and others as required. Other members of the multidisciplinary team. Patients and family/whanau.
PRIMARY OBJECTIVE:	To provide assessment, treatment, and rehabilitation of patients under the care of the Older Adults service, appropriate to the Registrar's level of experience. To provide support and supervision for House Officers.
RUN RECOGNITION:	This run is accredited by the RACP for training in general medicine and geriatric medicine.
RUN PERIOD:	26 weeks

Section 1: Responsibilities

<i>Area</i>	<i>Responsibilities</i>
Clinical Duties & Work Schedule	<ul style="list-style-type: none"> • To undertake ward rounds and clinics with allocated Consultant/s and attend multidisciplinary meetings with other health professionals involved with patient management and discharge planning. • Closely monitor medically unstable patients and ensure appropriate handover occurs to the on-call House Officer, Registrar, and Consultant. • Attend family meetings arranged for the patients under your care. • Communicate effectively with members of the multidisciplinary team to ensure optimal patient outcomes and timely discharge. • Communicate regularly with the supervising Consultant to ensure the provision of safe, effective care. • Supervise the duties of the allocated House Officer/s to ensure that management decisions made about patients are carried out according to best practice principles and guidelines. • Daily liaison with House Officers and to be available for consultation if required. • Undertake outpatient clinics. • Undertake domiciliary visits (generally Advanced Trainees only). • Undertake assessments on acute wards as assigned. • Be available to receive general practice enquiries regarding admissions or management issues involving older people. • Monitor discharge letters produced by the House Officers to ensure they are an accurate and timely record of care. • Ensure clinical notes are written in a problem orientated manner, when patients are assessed and/or management changes made. • Monitor acceptance of patient results by the House Officer to ensure this occurs in a timely and safe manner. • Participate in the weekly educational programme of the Older Adults service and, when required to do so, take responsibility for a presentation. • Presentation to Grand Round if rostered.
Research	<ul style="list-style-type: none"> • Research opportunities are available in consultation with the Clinical Director and Professor of Geriatric Medicine. Participation in clinical audit is encouraged.

<p>Administration</p>	<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. • 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 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: <ul style="list-style-type: none"> ○ “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.” ○ “Council believes that obtaining informed consent is a skill best learned by the House Officer 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 Duty Manager directly as well as the Consultant to which the Registrar is clinically responsible in the absent duty as soon as possible. • As an RMO working at WDHB you will be provided with a Clinical Portal login and a WDHB email account which will be used for all work-related communication. It is your responsibility to check this regularly.
<p>Other Duties</p>	<ul style="list-style-type: none"> • After hours duties include participation in the General Medical after-hours roster and cover for the General Medicine and Older Adults Wards at Waitakere Hospital.

Section 2: Training and Education

<i>Nature</i>	<i>Details</i>
Protected Time	<p>The Registrar will attend the following teaching sessions (unless attendance is required for an emergency):</p> <ul style="list-style-type: none"> • Medical Grand Round 1230 – 1330 Tuesdays in Auditorium, Whenua Pupuke, NSH or Kawakawa Room, WTH. • Prepare, if applicable, for the written and clinical RACP examinations. Teaching is held between 1330 – 1630 on Wednesdays at North Shore Hospital (and Auckland Hospital). Video conference facilities are available at both North Shore and Waitakere Hospitals and the expectation is that Registrars preparing for the examinations will attend. • Monthly Morbidity and Mortality meetings (Monday lunchtime). • Attend and present at Older Adults weekly teaching (Monday at North Shore Hospital and Friday at Waitakere Hospital). • Advanced Trainees in Geriatric Medicine are encouraged to attend the monthly Regional Geriatricians Journal Club and monthly Geriatric Advanced Trainee teaching. • Assist with junior medical staff teaching programmes. • Registrars may be requested to present case summaries and topic reviews. • Present at RACP Geriatrics teaching (advanced trainees only). • One afternoon of protected teaching time will be provided to advanced trainees.

Section 3: Cover

<i>Other Resident and Specialist Cover</i>
<p>There are seven Registrars employed in the Older Adults service at Waitemata DHB, two at Waitakere Hospital and five at North Shore Hospital. The on-call rosters for Older Adults at North Shore and Waitakere Hospitals are independent of each other.</p> <p>The Consultant on call must be contacted if there are problems with which the Registrar needs assistance.</p>

Section 4: Roster

<i>Hours of Work</i>	
Ordinary Hours of work:	
<ul style="list-style-type: none"> • Ordinary Hours (Monday to Friday) • Weekend days (Saturday and Sunday) • Long Days 	0800 – 1600 0800 – 1600 0800 – 2230
<p>The registrar will work 1:3 sets of weekend days Saturday and Sunday and no more than 2 long days per week (Monday to Friday) for all the Adult Medical services</p> <p>Cover for leave will be provided by the Medical Relief Registrars, in consultation with the Clinical Director. Leave will not be unreasonably withheld, provided safety and service commitments are not compromised.</p>	

Section 5: Performance appraisal

<i>Registrar</i>	<i>Service</i>
<p><i>The Registrar will:</i></p> <ul style="list-style-type: none"> • Ensure they arrange a formal meeting with their supervising Consultant to assess and discuss their performance at the beginning of the attachment, and again at three and six months. • If deficiencies are identified, the Consultant will discuss these with the Registrar who should implement a corrective plan of action under the advice of their Consultant. 	<p><i>The service will provide:</i></p> <ul style="list-style-type: none"> • 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. • Interim assessment meeting on the Registrar three (3) months into the run. • 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. • 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. • The Director of Basic Physician Training or Advanced Training will be available to discuss problems and progress. • Advanced Trainees in Geriatric Medicine will be provided with all reasonable opportunities to fulfill training requirements.

Section 6: Hours and Salary Category

In accordance with clause 12.1.2b of the SToNZ MECA, where there are week days completely free from rostered duties (RDOs), these days shall not be counted in the ordinary hours calculation as part of the run category. This excludes sleep recovery days that fall Monday through Friday. This will apply in the following circumstances:

1. As per Appendix 3: Transition Provisions – Translation to the Salary Categories in Clause 12 of the SToNZ MECA, where an RMO joins SToNZ and the published roster has weekday RDOs and these will be observed
2. There are week day RDOs as part of the roster

Where this applies the category for the run is set out below:

Average Working Hours - STONZ Run Category (RDO's are observed)		Service Commitments
Ordinary Hours	40	The Service, together with the RMO Support will be responsible for the preparation of any Rosters.
RDO Hours	-5.33	
Rostered Additional	11.83	
All other unrostered Hours	5.13	
Total Hours	51.63	

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

Average Working Hours - SToNZ Run Category (not observing RDO's)		Service Commitments
Ordinary Hours	40.00	The Service, together with the RMO Support will be responsible for the preparation of any Rosters.
Rostered additional hours	11.83	
All other unrostered hours	5.13	
Total Hours	56.96	

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