

RUN DESCRIPTION

| POSITION: | Registrar 1 st year + | | | |
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| DEPARTMENT: | Mental Health Services | | | |
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| PLACE OF WORK: | Matariki Community Mental Health Care (CMHC) | | | |
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| RESPONSIBLE TO: | General Manager and Clinical Director, Mental Health Services through the supervising Consultant and Team Manager, Matariki CMHC. | | | |
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| FUNCTIONAL | Health care clients, Hospital & Community based health care workers, NGO's | | | |
| RELATIONSHIPS: | DNSHIPS: and GP's. | | | |
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| NATURE OF | The attachment is to a multidisciplinary team. At times this may include medical | | | |
| ATTACHMENT: | students. | | | |
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| PRIMARY OBJECTIVE: | To facilitate the management of clients under the care of the Service. | | | |
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| RUN RECOGNITION: | This attachment is recognised by RANZCP as a training position for specialist qualification. | | | |
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| RUN PERIOD: | Six months | | | |

SECTION ONE: Registrar's Responsibilities

| Area | Responsibilities | | | |
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| 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 Matariki 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 when appropriate.

- The Registrar will be responsible for the day to day management of clients as follows:
 - The assessment of clients referred, including relevant assessment and ongoing management of physical health issues;
 - ➤ Liaison with health professionals to arrange appropriate care for people with severe mental illness;
 - Understanding of the special needs of members of minority groups and plan treatment accordingly;
 - ➤ The development and implementation of treatment plans, in conjunction with the client and caregivers, community mental health centre team members and the supervising Consultant;
 - Ongoing monitoring and review of treatment plans in accordance with changes in clinical condition of clients;
 - Maintenance of adequate records for the documentation of assessment, treatment plans and ongoing review of clients, including rationale for such plans and reviews;
 - Participation in a multidisciplinary approach to treatment;
 - On occasion, follow community clients into an inpatient setting.

After-Hours Responsibilities

Registrars participate in coverage of the mental health service outside of normal working hours, under the supervision of the on call Consultant. When rostered on after-hours duty Registrars are required to be on site at Middlemore Hospital and will take calls for the whole of the service. This may include answering calls from Community Mental Health Nurses and General Practitioners and arranging to have clients assessed, if necessary. If Registrar assessment is required, this can be undertaken in a community setting Tiaho Mai, ward 35 East (MHSOP), general hospital wards and the emergency Department

- Registrars provide assessment and review of clients presenting to and currently within
 the services. Functions in relation to the Mental Health Act will be discussed with the
 on call Consultant. The on call Consultant may involve the Director of Area Mental
 Health Services if necessary.
- It is expected that during after-hours duty Registrars in one shift work collegially with
 a spirit of co-operation and flexibility in the 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 Consultant 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 category 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 Consultant 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.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.

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.

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.

SECTION TWO: Training and Education

| Nature | Details | | |
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| 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 Consultant. | | |
| | Attendance and participation at other service and unit based education sessions as scheduled, including Monday Grand Rounds. 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 Consultant. | | |
| | Participation in weekly Registrar group meetings with the Training Facilitator or Director. | | |
| | Attendance at least one hour of individual supervision (two hours if first year trainee) each week with the supervising Consultant, at a time to be arranged with the Consultant. At least four hours of supervision of clinical practice will be provided each week. | | |
| | Time will be given to enable participation in preparation to fulfill the examination requirements for FRANZCP Basic and Advanced training. | | |
| Training and Development | Opportunities are available for ECT training. | | |
| Activities: | The Training Facilitator provides weekly training sessions on Psychotherapy. | | |
| | A 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. | | |

SECTION THREE: Roster

Roster

There are 14 Registrars on the roster and two Relievers.

Normal working hours are eight hours between 0730 to 1700, 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 two and five 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.

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 FOUR: Cover

Other Resident and Specialist Cover

Clinical attachments are to multidisciplinary teams which may include a House Officer, Trainee Intern and medical student(s).

There are 14 registrars on the roster and two Registrar Relievers.

The after-hours (long days, weekends, and nights) are shared at a frequency of 1:15 across the Registrars on the roster. The Registrars will work one or more period of nights during the run.

The Registrar reliever will be designated by the service from within the Registrars allocated to Mental Health at this DHB.

The Registrar reliever will work within their allocated Mental Health team/service during ordinary hours Monday to Friday (unless on a sleep day, rostered day off or leave). After hours the reliever will be assigned relief duties covering Registrars who are on leave from across the Mental Health Service at this DHB.

- ➤ 14 days notice will be given of any planned cover, for after hours, weekend or night duties.
- > The Registrar may be rostered to Short Notice Relief if required and where practicable.

SECTION FIVE: Performance Appraisal

| Registrar | | Service | | |
|---------------------|--|---------------------------|---|--|
| The Registrar will: | | The Service will provide: | | |
| • | 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; | • | 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; | |
| • | 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 | • | An interim assessment report on the Registrar three months into the run, after discussion between the Registrar, supervising Consultant and Team Manager/Service Manager; | |
| - | advice of their supervising Consultant where any deficiencies are identified. | • | The opportunity to discuss any deficiencies identified during the attachment. The supervising Consultant 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 SIX: Hours and Salary Category

| Average Working Hours | | Service Commitments |
|--|-------|---------------------|
| Basic hours | | |
| (Monday to Friday) | 40 | |
| Rostered additional hours | | |
| (including long days, nights and weekends) | 13.28 | |
| All other unrostered hours | 2.58 | |
| Total hours per week | 55.86 | |

Salary: The salary for this attachment is detailed as a Category C.