

RUN DESCRIPTION



POSITION:	Sleep Advanced Trainee
DEPARTMENT:	NZ Respiratory & Sleep Institute and Respiratory Department, Counties Manukau Health.
PLACE OF WORK:	Primary- New Zealand Respiratory & Sleep Institute(NZRSI), Greenlane Secondary- CMDHB outpatient clinic work and inpatient (including weekday evening and weekend) duties at CMDHB.
RESPONSIBLE TO:	Clinical Head Sleep CMDHB and Clinical Director, NZRSI.
FUNCTIONAL RELATIONSHIPS:	Healthcare consumer, Hospital and community based healthcare workers
PRIMARY OBJECTIVE:	To facilitate the management of patients under the care of the CMDHB Sleep Service and NZRSI.
RUN RECOGNITION:	This run is recognised for FRACP Advanced Training in Sleep Medicine.
RUN PERIOD:	12 months

Background:

Sleep Medicine

Sleep Medicine and Respiratory Medicine have evolved together in many ways over the past 30 years since the recognition of the common, and important, disorder of obstructive sleep apnoea and the development of effective therapy. Sleep Medicine however, also serves other closely related areas of internal medicine, encompassing: disorders of excessive sleepiness, predominantly; sleep breathing disorders including sleep apnoea and respiratory failure, restless leg syndrome, and narcolepsy; disorders of initiation and maintenance of sleep, predominantly Insomnia and disorders of chronobiology; movement disorders during sleep, particularly parasomnias, REM behaviour disorder and the nocturnal epilepsies. There are sleep consequences in patients who have medical and psychiatric disorders.

The clinical practice of Sleep Medicine requires an in-depth knowledge of the basic science of sleep, including neurological mechanisms of sleep and arousal, the circadian biology of the body; and the psychology of both individual behaviour and the society in which we all work. Knowledge of the regulation framework governing work practices underpins the need for investigation of the disorders of sleep. A detailed knowledge of all the disorders of sleep is required for confident diagnosis and selection of appropriate tests or need for external opinion. Detailed knowledge of the advantages and limitations of the various tests and the range of therapeutic options is necessary.

To adequately understand and manage nocturnal ventilatory failure and its treatment with Oxygen, Non-invasive ventilation, phrenic nerve pacing and adaptive servo-ventilation requires a detailed knowledge of the physiology of breathing and gas exchange, together with a detailed knowledge of pulmonary physiology and its assessment.

NZ Respiratory & Sleep Institute

NZRSI is a private facility offering consultations and investigations for patients with respiratory and/or sleep disorders, referred from general practitioners and other specialists. There are 8 consultants on site in Respiratory & Sleep Medicine, a sleep trained dentist, clinical psychologist and respiratory physiotherapist. We see patients with all sleep disorders including snoring and sleep apnoea, respiratory failure, circadian disorders, restless leg syndrome, narcolepsy, and parasomnias. We also see and manage patients with insomnia and have useful and important links to Dr Fernando at Practice 92 for patients with insomnia and psychiatric disorders.

A full range of investigations is available on site including Level I PSG studies (both diagnostic and split studies; MSLT and MWT) in a purpose designed 6 bed sleep laboratory, Level II studies (PSG in the home), Level III studies using ambulatory respiratory PSG (Embletta studies), Level IV studies using oximetry and airflow (Apnoea Link and Compass studies). In addition we undertake Actigraphy studies and use sleep diaries. Some parasomnias require prolonged infrared videography.

We provide a full range of pulmonary physiology investigations including Spirometry and Plethysmography volumes, DLCO; methacholine, hypertonic saline, and mannitol challenges; cardiopulmonary exercise tests using cycle ergometry or treadmill. We also provide and induced sputum service for assessment of airway cells and investigation of suspect TB. We measure expired nitric oxide using an EcoMedics CLD88 chemiluminescence device. ABG's are performed on site.

We provide pressure setting for CPAP and Bi-Level devices, and use servo-ventilators when required for sleep disordered breathing. We provide light therapies using green or white light and use melatonin or timed use of blue light filter sunglasses. We use a full range of sedative and stimulant medications, including benzodiazepines for REM behaviour disorder, modafinil methylphenidate and dexamphetamine for excessive sleepiness; dopaminergic agents, opiates and benzodiazepines for RLS.

We hold contracts with ADHB to undertake up to 150 sleep studies on children, and with CMDHB to undertake 150 PSG studies per year. We also have some patients referred from other DHB's.

We provide quality training for physiologists (Pulmonary and Sleep)
NZRSI also undertakes contracted research for pharmaceutical companies and has an experienced and active Research Department.

We believe we have a committed and skilled staff who is interested in teaching and research. The Registrar will receive quality sleep training second to none.

Section 1: Registrar Responsibilities

Area	Responsibilities
General	<p>The duties of the Registrar will include the following;</p> <ul style="list-style-type: none">• See new patients after referral by a primary or secondary care physician. This will be undertaken under the direct supervision of a specialist. Every case will be discussed before a report is generated and management decided.• Follow-up patients throughout their therapeutic journey.• Training in the performance of a complete range of sleep investigations including set-up, monitoring, reporting and interpretation of polysomnography, MSLT, MWT, Actigraphy, use of sleep diaries and Nocturnal infrared video recording.• Develop knowledge of the therapies of sleep disorders, including CPAP, NIV, adaptive servo ventilators, light therapies and behavioural management techniques and use of pharmaceuticals to enhance sleep or wakefulness.• Develop knowledge of pulmonary physiology and the physiological principles that underpin disorders of the lung.• Report selected Pulmonary Physiology assessments.• Contribute to NZRSI and CMDHB Teaching and Academic Meetings.

<i>Area</i>	<i>Responsibilities</i>
	<ul style="list-style-type: none"> • There will be an opportunity to contribute to ongoing research projects; self initiated, grant funded, and contracted pharmaceutical studies. • It is expected that the advanced trainee plan and undertake a project, to a standard suitable for presentation to the NZ Branch ASA meeting. <p>Relationships with external Departments;</p> <ul style="list-style-type: none"> • There will be an opportunity to interface with other specialists involved in the management of patients with a range of sleep disorders, particularly General Practitioners, Neurologists, Otolaryngologists, Psychiatrists, Psychologists and Physiotherapists. • You will develop a critical appreciation of the multidisciplinary nature of management of patients with sleep disorders.
Acute admitting	<ul style="list-style-type: none"> • An afternoon duty may be rostered at Middlemore Hospital, CMDHB and during this time the registrar will undertake acute admitting duties in ED.
On-Duty	<ul style="list-style-type: none"> • The Registrar will take part in a 1:4 weekend roster for the Respiratory Service and Middlemore Hospital. • The Registrar will take part in acute medical admission roster one evening a week. • There will be no weekday overnight on-call except on an ad hoc basis by arrangement with the Clinical Head.
Administration	<ul style="list-style-type: none"> • The Registrar will take responsibility for maintaining the quality of patient records, discharge documentation and prompt provision of discharge summaries for patients for whom responsible. • The Registrar will take responsibility for ensuring that patients, and where relevant relatives/friends, receive adequate education and explanation about their illness and its management within time and resources available. • The Registrar will be expected to have a current advanced CPR Certificate and have received training in GCP (training in GCP can be provided).

Section 2: Training and Education

<i>Training and Education</i>
<p>The run conforms to the RACP Requirements for advanced training in Respiratory and Sleep Medicine: the Adult Respiratory Medicine advanced training curriculum (sleep component), and the Sleep Medicine advanced training curriculum. <small>Appendix 2, 3, 4, (Available on the RACP website)</small></p> <p>It is expected that some components of the sleep curriculum will be, or have been, obtained in the acute respiratory runs, particularly acute ventilation with non invasive techniques.</p> <p>The Registrar will also attend the following;</p> <ul style="list-style-type: none"> • Weekly patient care discussion meeting • Weekly Academic Meeting at MMH (X-ray session, Journal Club, case discussion) <p>During the course of the run the Registrar will have access to the Physiology and Sleep Library on site. Access will also be provided to the Medical Libraries and Library Services at ADHB and CMDHB. There is very good broadband access to NZRSI (Fibre)</p>

Section 3: Weekly Schedule

	Monday	Tuesday	Wednesday	Thursday	Friday
a.m.	0800 Acute NIV and Ward 11 Spinal Unit review (MMH). PSG reporting (NZRSI)	0830-1230 Sleep Clinic (SJ and CO) (MSC)	0800 Acute NIV and Ward 11 Spinal Unit review (MMH)	0800 Acute NIV and Ward 11 Spinal Unit review PSG and Sleep Study reporting and/or project work (MMH)	0830-1230 Sleep Clinic NZRSI OR Bi-Level Clinic (MSC) (2 weeks in 4)
	1200-1300 Sleep physiology Lab Meeting (NZRSI)		1245-1320 Physiology Meeting (MSC or zoom)	1230-1300 Medicine Grand Round MMH	1200-1300 Sleep MDM Monthly (zoom, ACH)
p.m.	1300-1400 Sleep concordance meeting (MMH) (3 monthly) 1300- 1700 PSG scoring training and concordance NZRSI	PSG reporting NZRSI 1430-1630 P1 Sleep clinic 3 Urgent FSAs – linked to level 2 PSG (MSC)	PSG reporting and /or project work NZRSI	1300-1600 Weekly Radiology and Academic and MDTM Meetings (MMH)	Sleep clinic NZRSI
Evening			Set up and night duty. Ad hoc exposure only to ensure adequate knowledge of procedures	Optional 3 monthly peer group meeting (Karen Falloon)	

Note: dates and times for the sessions above may change.

There is a minimum of 4 hours per week medical learning, which includes the weekly tutorial, journal club and pathology session.

Section 4: Roster

<i>Roster</i>

Roster

Hours of Work

Ordinary Hours – Monday to Friday 0800-1700

Acute Medical Admission – One evening a week (17) 1600-2200

Respiratory Weekends – 1:4 Saturday & Sunday 0800-1600 one day, 0800-2200 one day

The Registrar will work from 8am to 5pm, 5 days per week, unless there is a mutually agreed arrangement with the Clinical Director. (there will be some evening and night work at NZRSI to ensure a thorough understanding of sleep lab processes which will be by agreement with the Registrar and remunerated over and above the salary for this run.)

The Registrar will also take part in the weekend General Medicine/Respiratory Ward cover roster at CMDHB (1:4) as well as an acute admission duty one evening per week.

Across the CMDHB General Medicine and Medical Specialties services there will be:

- 1) A consistent workload for 2 Registrars overnight (2200-0800). At times there may be a 3rd night Registrar rostered, however, this is currently a supernumerary shift and may only be filled where cover permits
- 2) In addition there is 1 Registrar rostered to 1600 – 0000 daily in Medical Assessment Unit, who may remain on site until 0400 at the latest to support workload requirements, this is accounted for within the on-call component of the run description.
- 3) A consistent workload for 6 Registrars rostered to weekday long days (Monday-Friday).
- 4) A consistent workload for the following weekend shifts.
 - 6x Saturday long days
 - 5x Saturday short days
 - 5x Sunday long days
 - 6x Sunday short days.
 - At times an additional Registrar may be rostered to the weekend, however, this is currently a supernumerary shift and may only be filled where cover permits.
- 5) This excludes Cardiology and Renal service long days and weekends

Section 5: Cover:

Other Resident and Specialist Cover

There are 8 consultants on site in Respiratory & Sleep Medicine, a sleep trained dentist, clinical psychologist and respiratory physiotherapist.

Section 6: Performance appraisal

Performance Appraisal

The Clinical Director will meet with the trainee at the beginning of the attachment and 2 monthly to formally review training objectives. A formal report will be generated as required for the regional training hub and the college.

Section 7: Hours and Salary Category

Average Working Hours	Service Commitments
Basic hours (Mon-Fri) 40	The Service, together with the RMO Support Unit will be responsible for the preparation of any Rosters.

<i>Average Working Hours</i>		<i>Service Commitments</i>
Rostered additional hours (inc. nights, weekends & long days)	14.91	
All other unrostered hours (to be confirmed by a run review)	TBC	
Total hours per week	54.91	

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

Total hours fall above the middle of the salary band therefore the run will be remunerated as a C run category until the unrostered hours can be confirmed by a run review.