

RUN DESCRIPTION

| POSITION: | Registrar - Neonates |
|---------------------------|---|
| DEPARTMENT: | Kidz First Neonatal Care |
| PLACE OF WORK: | Middlemore Hospital |
| RESPONSIBLE TO: | General Manager, Kidz First, through the Clinical Director/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 Neonatal Specialty. |
| | |
| RUN RECOGNITION: | This run is recognised as a training position for specialist qualification by the RACP. |
| | |
| RUN PERIOD: | 6 Months |

Section 1: Registrar's Responsibilities

| Area | Responsibilities |
|----------------|--|
| General | The registrar will be responsible for the care of neonates at Middlemore Hospital in the Neonatal Unit (NNU), and some of those in the postnatal or Kidz First wards, in delivery suite, and in the caesarean section theatre. |
| | On each day time rostered day, the registrar will attend the daily consultant ward round on NNU and be responsible for designated neonates in NNU. |
| | The registrar will attend 'at risk' deliveries (as defined in NNU/Obstetric guidelines) in delivery suite and the caesarean section theatre as notified or requested |
| | The registrar will be responsible for the assessment and management of sick infants seen in or referred from delivery suite or the caesarean section theatre; under the care of NNU or referred from the post natal wards; referred from other hospitals; or referred from the community |
| | The registrar may be required to accompany neonates being transported between institutions from time to time. |
| | The on duty registrar will be available for consultations and advice requested by GPs, midwives or obstetricians. |
| | The registrar will liaise with other health care professionals as appropriate. |
| | Registrars have a responsibility to provide support and advice to parents. |
| | Clinical skills and judgement are expected to improve during the attachment. |
| Administration | The registrar will ensure there is a detailed handover at any change of duties. |

| Area | Responsibilities | | | | |
|------|--|--|--|--|--|
| | Appropriate written and dictated notes will be made whenever necessary. | | | | |
| | The registrar will have responsibility for following up any investigations ordered. | | | | |
| | Other administrative paperwork such as database maintenance or death certificates will be completed as required. | | | | |

Section 2: Training and Education

Training and Education

In accordance with the CTA requirements for basic physician trainees.

Ongoing education will be provided by consultants and fellows in the NNU. Individualised educational objectives will be set for each registrar at the beginning of the run.

The registrar will be rostered to two 8 hour teaching days every 6 weeks. In addition the following education sessions are available to Registrars:

- Neonatal X-ray Conference Middlemore Hospital.
- Paediatric Updates and Grand Round Starship Children's Hospital.
- Neonatal Grand Round Auckland Hospital
- Neonatal Grand Round Middlemore Hospital.
- Teaching sessions are run by Auckland University Department of Paediatrics for trainees sitting the FRACP exam Thursday afternoons 3 pm. (Linked by Videoconference to Kidz First)
- Clinical supervision provided directly and indirectly through the NNU ward rounds.

The registrar will be expected to contribute to the training of allied health and nursing staff.

This attachment is recognised as a training position for specialist qualification.

Section 3: Roster

Roster

There are six registrars employed on the Neonatal roster. Hours of work include:

- Nights 2000 0800
- 8 hour days 0800 1600
- 12 hour days 0800 2000
- Teaching 0800 1600

| | M | Т | W | Т | F | S | S |
|-------|----|----|----|----|----|----|----|
| Reg 1 | N | N | N | N | Х | Χ | Х |
| Reg 2 | 8 | 12 | 8 | 8 | T | Χ | X |
| Reg 3 | 12 | 8 | 8 | 12 | 8 | Χ | X |
| Reg 4 | 8 | 8 | Χ | Χ | N | N | N |
| Reg 5 | Χ | Χ | Χ | Т | 12 | 12 | 12 |
| Reg 6 | Х | Х | 12 | 8 | 8 | Х | Х |

Section 4: Cover

Other Resident and Specialist Cover

Annual leave is covered internally. Annual leave cover is allocated on a "first come first served" basis and applications for leave should be submitted as early as possible.

Absence from work due to sickness will be covered by other medical staff within the service.

A maximum of 15 days leave may usually be taken in each six month period, unless otherwise agreed

Section 5: Performance appraisal

Registrar

Performance will be assessed by a nominated Neonatologist or Paediatrician. Performance will be assessed based on the above criteria and other relevant performance measures which will be discussed at formal meetings held at a maximum of three monthly intervals. If deficiencies are identified during the attachment the senior medical officer will bring these to the registrar's attention and discuss how they may be rectified.

Section 6: Hours and Salary Category

| Average Working Hou | rs | Service Commitments | | |
|--|-----|---|--|--|
| Rostered Hours | 44 | The Service, together with the RMO Unit will be responsible for the preparation of any Rosters. | | |
| Unrostered hours (to be confirmed by a run review) | TBC | | | |
| Total Hours | 44 | | | |

Salary: The salary for this attachment is estimated to be a category E (paid a minimum of a C in line with shift rostering provisions).