

## RUN DESCRIPTION

<b>POSITION:</b>	Registrar
<b>DEPARTMENT:</b>	Urology
<b>PLACE OF WORK:</b>	North Shore Hospital & Waitakere Hospital
<b>RESPONSIBLE TO:</b>	Clinical Director and Business Manager of Urology through a nominated Consultant
<b>FUNCTIONAL RELATIONSHIPS:</b>	Healthcare consumers, Hospital and community based healthcare workers
<b>PRIMARY OBJECTIVE:</b>	To facilitate the management of patients under the care of Urology
<b>RUN RECOGNITION:</b>	This run is recognised by the RACS as a basic training position for specialist qualification
<b>RUN PERIOD:</b>	6 months

### Section 1: Responsibilities

<i>Area</i>	<i>Responsibilities</i>
<b>General</b>	<ul style="list-style-type: none"> <li>The Registrar will supervise the work of a House Officer, with whom they will organise the investigation and management of inpatients under the care of the Department.</li> <li>The Registrar will be available to attend Consultant ward rounds and will have a current knowledge of the progress of inpatients under their care, and liaise with the Consultant as necessary. When on-call, the Registrar will answer calls by General Practitioners about patients and arrange to assess them as necessary.</li> <li>The Registrar will attend rostered outpatient clinics promptly and will endeavour to see outpatients at their scheduled appointment times. Outpatients not previously seen in the Department, or who are to be discharged, will be discussed with a Consultant. Acute patients presenting to Outpatient Clinic must be assessed within a reasonable time.</li> <li>Clinical skills, judgement and knowledge are expected to improve during the attachment.</li> <li>Legible notes will be written in patient charts on admission and whenever management changes are made.</li> <li>A letter to the patients' General Practitioner will be dictated after their discharge from hospital.</li> <li>The Registrar is responsible for the completion of death certificates for patients who have been under their care, although this may be delegated to a House Officer.</li> </ul>

Area	Responsibilities
	<ul style="list-style-type: none"> <li>• Letters will be written to the patients' General Practitioner after each outpatient visit. The results of all investigations will be sighted and signed before they are filed in the patients' chart.</li> <li>• Maintain a high standard of communication with patients, patients' families and staff;</li> <li>• Inform consultants of the status of patients especially if there is an unexpected event;</li> <li>• Attend hand-over, team and departmental meetings as required.</li> </ul>
<b>Admitting</b>	<ul style="list-style-type: none"> <li>• Assess and admit Urology patients referred by ED or from the community.</li> </ul>
<b>On-Call</b>	<ul style="list-style-type: none"> <li>• Provide advice to and liaise with GP's and other hospital medical staff on Urology matters;</li> <li>• Authorise patients to be transferred to and be seen by the Urology service when appropriate</li> <li>• After hours on call at nights and during the weekend will be as part of the on call roster at Auckland City Hospital. During the working week the registrar is responsible for assessing post operative complications and inpatient referrals.</li> </ul>
<b>Inpatients</b>	<ul style="list-style-type: none"> <li>• When allocated ward duties within the service undertake regular examination management of, and updating of management plan of admitted patients for whom the team is responsible on a frequency agreed with the clinical director;</li> <li>• Ensure relevant documents, e.g. discharge summary, medication card and follow-up appointments are given to patient on discharge as necessary.</li> <li>• Ensure weekend plans for patient's management are documented in the notes;</li> <li>• When not on duty on Friday evening or the weekend, inform the on-duty medical staff about patients whose condition requires monitoring and review;</li> <li>• Complete documentation on Friday prior to known or likely weekend discharges.</li> </ul>
<b>Outpatients</b>	<ul style="list-style-type: none"> <li>• Assess and manage patients referred to outpatient clinics and run the clinics on behalf of senior staff where appropriate</li> <li>• Communicate with referring person following patient attendance at clinics;</li> <li>• Arrange and perform outpatient investigations where appropriate</li> </ul>
<b>Administration</b>	<ul style="list-style-type: none"> <li>• 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;</li> <li>• Be responsible for certifying death and complete appropriate documentation;</li> <li>• At the direction of the Clinical Director, assist with operational research in order to enhance the performance of the Service;</li> <li>• Dictate discharge summaries on patients that are discharged by their team and letters to General Practitioners following outpatient visits in a timely fashion;</li> <li>• Obtain informed consent for procedures within the framework of the Medical Council guidelines which state: <ul style="list-style-type: none"> <li>1. <i>"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."</i></li> </ul> </li> </ul>

Area	Responsibilities
	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.

## Section 2: Training and Education

Nature	Details
<i>Protected Time</i>	<p><i>The following educational activities will be regarded as part of normal duties (unless attendance is required for other duties as per roster)</i></p> <ul style="list-style-type: none"> <li>• Orientation at the beginning of the run</li> <li>• There will be a minimum of 6 hours per week of education sessions. The clinical meetings include the Journal Club, the Radiology Conference, Pathology Conference and include department seminars and audit and morbidity meetings. The Registrar will contribute to clinical meetings, and during the attachment will present an in-depth review of a topic to the Medical Staff of the Department.</li> <li>• There will be 3 hours teaching on Friday afternoons for Registrars.</li> </ul> <p><i>Timing of educational sessions is subject to change</i></p>
	<ul style="list-style-type: none"> <li>• Through example and supervision the Registrar will actively contribute to the education of House Officers. The Registrar will be expected to teach other health care workers and medical students.</li> </ul>

A research project should be undertaken during the attachment subject to approval by the Clinical Head of Department and Manager.

## Section 3: Cover

<i>Other Resident and Specialist Cover</i>
<p>There is 1 Urology SET Trainee at WDHB. This Registrar participates in a Regional roster at ACH which includes 2x SET Registrars at ADHB, 4x non SET Registrars at ADHB, 1x non-SET Registrar at MMH and 1x Night Reliever.</p> <p>The ordinary hours of work will be 0730 hours to 1600 hours, Monday to Friday. Additional hours over and above the ordinary hours will be worked as set out in the attached roster. This includes:</p> <ul style="list-style-type: none"> <li>○ Monday – Friday long days (0800 – 2230)</li> <li>○ Saturday and Sunday Long Days (0730 – 2215)</li> </ul> <p>RMO's may be asked to attend Saturday Ward Rounds. This will generally be required every second weekend alternating with the Fellow and will take approximately 2 hours. The unrostered ward rounds are not a requirement; however, there are a number of unrostered hours included in the run category to cover such occurrences.</p>

## Section 5: Performance appraisal

<i>Registrar</i>	<i>Service</i>
<p><i>The Registrar will:</i></p> <ul style="list-style-type: none"> <li>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</li> <li>after any assessment that identifies deficiencies, implement a corrective plan of action in consultation with their Consultant;</li> </ul>	<p><i>The service will provide,</i></p> <ul style="list-style-type: none"> <li>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.</li> <li>An interim assessment report on the Registrar three <b>(3)</b> months into the run, usually verbally, after discussion between the Registrar and the Consultant responsible for them;</li> <li>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;</li> <li>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.</li> </ul>

## Section 6: Hours and Salary Category

<i>Average Working Hours</i>	<i>Service Commitments</i>
<p>Basic hours (Mon-Fri) 40</p> <p>Rostered additional hours (inc. nights, weekends &amp; long days &amp; callbacks of 5 hrs) 12</p> <p>All other unrostered hours 8</p> <p>Total hours per week 60</p>	<p>The Service, together with the RMO Support Unit will be responsible for the preparation of any Rosters.</p>

**Salary** The salary for this attachment will be as detailed as a Category B run category. There are a number of unrostered hours included within the salary category for Saturday ward rounds.