# Te Whatu Ora Health New Zealand

# **Run Description**

POSITION:	Registrar		
DEPARTMENT:	Paediatric Cardiology		
PLACE OF WORK:	Starship Children's Hospital		
RESPONSIBLE TO:	Clinical Director and Business Manager of Paediatric Congenital and Cardiac services, through a nominated Consultant.		
FUNCTIONAL RELATIONSHIPS:	Healthcare consumer, Hospital and community-based healthcare workers		
PRIMARY OBJECTIVE:	To facilitate the management of patients under the care of the Paediatric Congenital and Cardiac service,		
RUN RECOGNITION:	This run is recognised by the RACP as a training position for specialist qualification		
RUN PERIOD:	6 months		

## Section 1: Registrar's Responsibilities

Area	Responsibilities			
General	• Work closely with the team's House Officer, provide supervision and share responsibilities where and when appropriate.			
	• Manage the assessment and admission of acute and elective patients under the care of his/her team. Undertake clinical responsibilities as directed by the Consultant, also organise relevant investigations, ensure the results are followed up, sighted and electronically signed.			
	• Responsible for patient referrals and day to day ward management of patients under their team's care, in consultation with others involved in the care of the patient where appropriate.			
	<ul> <li>Work closely with paediatric cardiologists in provision of assessment and investigations of new patients and follow-ups in outpatient clinics and day case reviews.</li> </ul>			
	Undertake diagnostic and treatment procedures appropriate to the subspecialty			
	<ul> <li>Maintain a high standard of communication with patients, patients' families and staff and referring practitioners, including prompt discharge and clinic letters and cardiosurgical summaries</li> </ul>			
	• Inform consultants of the status of patients especially if there is an unexpected event.			
	• Attend hand-over, team and departmental meetings as required.			
Admitting	• Assess and admit Paediatric Cardiology and cardiac surgical patients referred to PCCS from the community, from PICU or other departments with ADHB or other hospitals.			

Area	Responsibilities				
Ward Review	Paediatric Cardiology Referrals from other departments				
On-Call	• After hours duties include a 1 in 3 roster for weekends from 0800-1700 on ward 23B and sharing in ward coverage between 1700 and 1900 in the evening when working a long day.				
Inpatients	• When allocated ward duties (one in three) within the service undertake regular examination management of, and updating of management plan of admitted patients for whom PCCS is responsible.				
	• Ensure diagnostic / therapeutic procedures are duly booked and follow through with the results				
	• Ensure relevant documents, e.g. discharge summary, medication card and follow-up appointments are given to patient on discharge as necessary.				
	• Ensure out of regular hours plans for patient's management are documented in the notes, particularly at weekends.				
	• Inform the on-call medical staff about patients whose condition requires monitoring and review overnight or at weekends.				
Outpatients	• Assess and manage patients referred to outpatient clinics and days stay assessment in collaboration with the supervising consultant.				
	Arrange outpatient investigations if necessary, and supervise exercise tests when required				
	Communicate with referring person following patient attendance at clinics				
Administration	• 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 discharge summaries on patients that are discharged by their team and 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:				
	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."				
	<ul> <li>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.</li> <li>(Consent for most catheter and surgical procedures are obtained by a consultant or a specifically designated fellow).</li> </ul>				

#### Ward Paediatric Registrar

	Monday	Tuesday	Wednesday	Thursday	Friday	
0800	ICU Ward Round	ICU Ward Round	ICU Ward Round	ICU Ward Round	ICU Ward Round	
	Liai	Liaise with ICR registrar about transfers at 10:30am by phone or visit				
		Laise with ICK registral about transfers at 10.50am by phone of visit				
	Ward Round PCCS	Consultant Ward	Registrar Ward	Ward Round	Consultant Ward	
	Forum	Round	Round		Round	
1030						
	Journal Club		1200 Imaging			
1200			Conference			
1700			Consultant			
1700			Consultant			
			Teaching			

#### Clinic and Day stay Paediatric Registrar

Should attend the adult cardiology/general Paeds Reg teaching if possible

	Monday	Tuesday	Wednesday	Thursday	Friday
0730		Card Reg Teaching		Cardiology Teaching for fellows & registrars (optional)	
0800					
0800-0820		Ge	n Paed Handover Sta	rship	
0830	Cardiosurgical Conference	Consult Pager			Day stay Reviews
0845	PCCS Forum Journal Club		Day Stay 1200 Imaging Conference	Consult Pager	/ Exercise tests (variable)
1030	Arrhythmia clinic				
1200	(JS) (when Jon Skinner is not on	Clinic	Clinic		
1300	call for the ward)				
				Clinic	Consultant Teaching

Important note for ward registrar: Mondays is a particularly busy day and is disrupted by the C/S conference.

**Patients who are planned to be discharged on Friday:** The paperwork (discharge summaries) should be completed on Thursdays and to be checked by the consultant who is finishing the service week (as new consultant is coming on Friday).

**Clinic and Day Stay Registrar:** Carries **'consult'** phone on Tuesdays and Thursdays. Responsible for discussing referred patients with the 2<sup>nd</sup> 'on call' consultant and for handing over any outstanding investigations to the person (fellow) who is on call the next day; if required.

There is a handover folder on 'N' drive (N:\Groups\Everyone\zzzzzcardiosurgical conference) 'Consults Paed cardiology.xls' where consults should be logged.

### **Section 3: Training and Education**

Nature	Details				
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 beg	Orientation at the beginning of the run			
	Academic activities				
	Most activities run for about 11 months of the year; they take place in the department conference room. Please attend these meetings on time (1hr sessions, journal club is ½ hr)				
	Monday	1030	PCCS seminar/forum (Morbidity/Mortality 10am)		
	Monday	1200	Journal Club		
	Tuesday	0730	Adult Cardiology Registrar Teaching		
	Wednesday	1300-1700	Registrar Teaching		
	Thursday	0730	Paediatric Cardiology registrar/fellow teaching (optional)		
	Friday	1300	Child Health Grand Round		
		1500	Paeds Card Reg teaching (on call consultant)		
	<ul> <li>Each registrar is required to present a journal club and a forum during their tenure. The supresentation should be discussed beforehand with your supervising paediatric cardiol trainees will be responsible for rostering for the above presentations.</li> <li>Post exam FRACP registrar will be expected to produce a project, planning for publication of Both should make a contribution to the ward 23B protocol book.</li> <li>The Registrar is expected to contribute to the education of nursing, technical staff and medical requested.</li> </ul>				

#### Section 4: Roster

Ordinary hours	Monday to Friday	0800 - 1700
<ul> <li>Long days on site</li> </ul>	Monday to Friday	0800 - 1900
Weekend long day on site	Saturday and Sunday	0800 - 1600
Clinical Administration day	Monday to Friday	0800 - 1700

- Cardiology will be allocated to three clinical administration days per four-month rotation
- Each Registrar contributing to the roster will be rostered up to two sets of RDO's not abutting a weekend free of duty per four-month rotation.

#### Section 5: Cover

• Cover for sickness is provided by the short notice reliever (when available), or by the payment of additional duties or cross cover (as per the collective agreement.)

There are 12 subspecialty Paediatric Registrars

- 3 Cardiology Registrars
- 2 Respiratory Registrars
- 2 Oncology Registrars
- 1 Endocrinology Registrar
- 1 Gastroenterology Registrar
- 1 Neurology Registrar
- 1 Infectious Diseases/Immunology Registrar
- 1 Renal Registrar There is one Child Protection Registrar, four General Paediatric Registrars, one Consult Liaison Registrar and one Outpatient Clinic Registrar
- There are six Paediatric Registrar Relievers who will cover the duties of the Registrars on leave, night duties, sleep days rostered days off (RDO) and clinical administration days.

#### Section 5: Performance appraisal

Registrar	Service	
The Registrar will:	The service will provide,	
<ul> <li>At the outset of the run meet with their assigned supervisor/s to discuss goals and expectations for the run, review and assessment times, and one on one</li> </ul>	• 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.	
<ul> <li>After any assessment that identifies deficiencies, implement a corrective plan of action in consultation</li> </ul>	• An interim assessment report on the Registrar halfway through the run, after discussion between the Registrar and the Consultant responsible for them.	
with their Consultant.	• 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.	
	• 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 6: Hours and Salary Category

#### Summer/Winter

Average Working Hours		Service Commitments
Basic hours (Mon-Fri)	40.00	Together, The Service with the RMO Support Unit will be responsible for the preparation of any Rosters.
RDO Hours	-5.33	
Rostered additional hours (inc. nights, weekends & long days)	8.00	
Add 5hours for the 9hr normal day	5.00	
All other unrostered hours (To be confirmed by Run Review)	ТВС	
Total hours per week	47.67	

Salary: The salary for this attachment is a Category D.

Total hours fall above the middle of the salary band therefore the run will be remunerated as a **D** run category instead of E Category until the unrostered hours can be confirmed by a run review