

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
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; Work closely with Paediatric cardiologists in provision of assessment and investigations of new patients and follow-ups in outpatient clinics and day case reviews. Undertake diagnostic and treatment procedures appropriate to the subspecialty Maintain a high standard of communication with patients, patients' families and staff and referring practitioners, including prompt discharge and clinic letters and cardiosurgical summaries 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.
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 patients 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: "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." "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. (Consent for most catheter and surgical procedures are obtained by a consultant or a specifically designated fellow).

Section 2: Weekly Schedule

Ward Paediatric Registrar

	Monday	Tuesday	Wednesday	Thursday	Friday	
0800	ICU Ward Round	ICU Ward Round	ICU Ward Round	ICU Ward Round	ICU Ward Round	
	<u>Lia</u>	Liase with ICR registrar about transfers at 10:30am by phone or visit				
	Ward Round PCCS	ConsultantWard	Registrar Ward	Ward Round	ConsultantWard	
	Forum	Round	Round		Round	
1030						
1200	Journal Club		1200 Imaging Conference			
			Consultant Teaching			
1700						

Clinic and Daystay Paediatric Registrar Should attend the adult cardiology/general paed reg teaching if possible

	Monday	Tuesday	Wednesday	Thursday	Friday
0730		CardReg		Cardiology	
		Teaching		Teaching for	
				fellows &	
				registrars	
				(optional)	
0800-0820		<u>Ge</u>	en Paed Handover Starsl	nip	
0830	Cardiosurgical	Consult Pager			
	Conference				Daystay Reviews /
0845			DayStay		Exercise tests
	PCCSForum				(variable)
	Journal Club		1200 Imaging	Consult Pager	
1020			Conference		
1030					
1200	Arrhythmia clinic	Clinic			
1200	(JS)(whenJon	Cillic	Clinic		
1300	Skinnerisnoton		Cillic		
1300	callfortheward)			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 2nd 'on call' consultant and for handing over any outstanding investigations to the person (fellow) who is on call the next day; if required.

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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 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 10.30 PCCS seminar/forum (Morbidity/Mortality 10am) Monday 12.00 noon Journal Club Tuesday 7.30am Adult Cardiology Registrar Teaching Wednesday 1.00pm-17.00pm Registrar Training Thursday 7.30am Paediatric Cardiology registrar/fellow teaching (optional) Friday 1.00pm Child Health Grand Round 3.00pm Paed Card Reg teaching (on call consultant)			
	 Each registrar is required to present a journal club and a forum during their tenure. The subject matter and presentation should be discussed beforehand with your supervising Paediatric cardiologist. Designated trainees will be responsible for rostering for the above presentations. Post exam FRACP registrar will be expected to produce a project, planning for publication during their stay. Both should make a contribution to the ward 23B protocol book. The Registrar is expected to contribute to the education of nursing, technical staff and medical staff when requested. 			

Section 4: Roster

The hours of work of the Paediatric Cardiology Registrars are as follows:

•	Ordinary hours	Monday toFriday	0800-1700
•	Long days on site	Monday toFriday	0800-1900
•	Weekend long day on site	Saturday and Sunday	0800-1600
•	Clinical Administration day	Monday toFriday	0800-1700

- Winter roster: ward call shifts 1000-2230 on weekends
- 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

There are 12 subspeciality 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.
- 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.)

Section 5: Performance appraisal

Registrar	Service
 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 teaching time After any assessment that identifies deficiencies, implement a corrective plan of action in consultation with their Consultant; 	 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. An interim assessment report on the Registrar halfway through the run, after discussion between the Registrar and the Consultant responsible for them. 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

In accordance with clause 12.1.2b of the SToNZ MECA, where there are weekdays completely free from rostered duties (RDOs), these days shall not be counted in the ordinary hours calculation as part of the run category. This excludes sleep recovery days that fall Monday through Friday. This will apply in the following circumstances:

- 1. As per Appendix 3: Transition Provisions Translation to the Salary Categories in Clause 12 of the SToNZ MECA, where an RMO joins SToNZ and the published roster has weekday RDOs and these will be observed
- 2. There are weekday RDOs as part of the roster

Where this applies the category for the run is set out below:

Average Working Hours - STONZ Run Category (RDO's are observed)		Service Commitments
Ordinary Hours	40.00	The Service, together with the RMO Unit will be responsible for the preparation of any Rosters.
RDO Hours	-5.33	,,
Rostered Additional Add 5 hours for 9hr Normal day	8.00 5.00	
All other unrostered Hours	5.00	
Total Hours	52.67	

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

Where no weekday RDOs are observed, the following run category will apply:

Average Working Hours - SToNZ Run Category (not observing RDO's)		Service Commitments
Ordinary Hours	40.00	The Service, together with the RMO Unit will be responsible
Rostered additional hours Add 5 hours for 9hr Normal Day	13.00 5.00	for the preparation of any Rosters.
All other unrostered hours	5.00	
Total Hours	58.00	

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