



RUN DESCRIPTION

POSITION:	Registrar
DEPARTMENT:	Neurology
PLACE OF WORK:	Auckland Hospital
RESPONSIBLE TO:	Clinical Director and Business Manager of Neurology, 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 Neurology service,
RUN RECOGNITION:	This run is recognised by the Royal Australasian College of Physicians as a training position for specialist qualification
RUN PERIOD:	6 months

Section 1: Registrar's Responsibilities

<i>Area</i>	<i>Responsibilities</i>
General	<ul style="list-style-type: none"> • Work closely with the team's House Officer, to 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 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 consultants in provision of assessment and investigations of new patients and follow-ups in outpatient clinics

Area	Responsibilities
	<ul style="list-style-type: none"> • Undertake diagnostic and treatment procedures appropriate to the subspecialty • Maintain a high standard of communication with patients, patients' families and staff; • Inform consultants of the status of patients especially if there is an unexpected event; • Attend hand-over, team and departmental meetings as required. • Undertake teaching sessions with medical students, house officers and other Registrars at the direction of the Service.
Admitting	<ul style="list-style-type: none"> • Assess and admit Neurology and stroke patients referred by ED or from the community
On-Call	<ul style="list-style-type: none"> • Provide advice to and liaise with GP's and other hospital medical staff on Neurology matters; • Authorise patients to be transferred to and be seen by Neurology service when appropriate
Inpatients	<ul style="list-style-type: none"> • When allocated ward duties within the service undertake regular examination management of, and updating of management plan of admitted patients for whom the Neurology service is responsible on a daily basis or on a frequency agreed with the consultant in charge of the patient. • Ensure x-rays are organised for weekly team radiology sessions; • Ensure relevant documents, e.g. discharge summary, medication card and follow-up appointments are given to patient on discharge as necessary. • Ensure weekend plans for patient's management are documented in the notes; • When not on duty on Friday evening or the weekend, inform the on-duty medical staff about patients whose condition requires monitoring and review; • Complete documentation on Friday prior to known or likely weekend discharges.
Outpatients	<ul style="list-style-type: none"> • Assess and manage patients referred to outpatient clinics and run the clinics under supervision of senior staff where appropriate • Arrange and perform outpatient investigations • Communicate with referring person following patient attendance at clinics

Area	Responsibilities
Administration	<ul style="list-style-type: none"> • 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 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: <ol style="list-style-type: none"> 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> 2. <i>“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.</i>

Section 2: Weekly Schedule

	Monday	Tuesday	Wednesday	Thursday	Friday
a.m.	Clinical duties	Clinical duties	Tutorial Clinical duties	Clinical review session	Neurophysiology tutorial Clinical duties
p.m.	Clinical duties	Clinical duties	Clinical duties	Clinical duties	Clinical duties

Section 3: Training and Education

<i>Nature</i>	<i>Details</i>
Protected Time	<p>The following educational activities will be regarded as part of normal duties (unless attendance is required for other duties as per roster)</p> <ul style="list-style-type: none">• Orientation at the beginning of the run• Wednesday morning tutorial, Thursday morning clinical review session, Friday morning tutorial <p>Timing of educational sessions is subject to change</p>
<p>The Registrar is expected to contribute to the education of nursing, technical staff and medical staff when requested. The Registrar is also expected to complete a research project during the run.</p>	

Section 4: Roster:

Other Resident and Specialist Cover

There are 6 Registrars contributing to the Neurology roster Monday to Wednesday. On Thursday and Friday there are 5 Registrars contributing to the Neurology roster. Consultants will be available on call to attend the workplace if necessary

The on call responsibilities will be 1:6

When rostered on a long day Monday to Friday, the Registrar will be on duty from 0800-2230. On Saturday and Sunday the Registrar will be on duty from 0800-2230.

Registrars also participate for the 6 months of their run in a medical Subspecialty night duty roster. The registrars will be required to work an maximum of 10 nights during the 6 months of the run.

When on night duty the registrar will be responsible for duties both in the Medical Specialities and General Medicine, these duties will be shared between the Medical Registrars on duty and will involve admissions and ward duties.

Rostered Days Off (RDOs)

As part of meeting the agreed limit on consecutive days of work set out in Schedule 10 of the RMO MECA, from 12 June 2017, each weekend duty that is actually worked by an RMO will generate a rostered (weekday – Monday to Friday) day off (RDO) for that RMO in that fortnight.

RDOs will be noted as such within the established roster pattern for the service, and will be notionally applicable in the first instance to the RMO rostered for the relevant weekend duty(duties).

If the rostered RMO does not actually work the particular rostered weekend duty(duties) for any reason, then unless otherwise formally advised by the service (or unless an application for paid or unpaid leave is approved), they will be required to report for ordinary duty(duties) on the day(days) that would otherwise have been a RDO(s). That RDO may instead be observed by the RMO who actually worked the relevant weekend duty(duties).

Section 5: Performance Appraisal

<i>Registrar</i>	<i>Service</i>
<p>The Registrar will:</p> <ul style="list-style-type: none"> 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 After any assessment that identifies deficiencies, implement a corrective plan of action in consultation with their Consultant; 	<p>The Service will provide,</p> <ul style="list-style-type: none"> 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 three (3) months into 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

6a: Hours and Salary Category

<i>Average Working Hours</i>	<i>Service Commitments</i>								
<table> <tr> <td>Basic hours (Mon-Fri)</td> <td style="text-align: center;">40</td> </tr> <tr> <td>Rostered additional hours (inc. nights, weekends & long days)</td> <td style="text-align: center;">12.95</td> </tr> <tr> <td>All other unrostered hours</td> <td style="text-align: center;">5.91</td> </tr> <tr> <td>Total hours per week</td> <td style="text-align: center;">58.86</td> </tr> </table>	Basic hours (Mon-Fri)	40	Rostered additional hours (inc. nights, weekends & long days)	12.95	All other unrostered hours	5.91	Total hours per week	58.86	<ul style="list-style-type: none"> The Service, together with the RMO Support Unit will be responsible for the preparation of any Rosters.
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Rostered additional hours (inc. nights, weekends & long days)	12.95								
All other unrostered hours	5.91								
Total hours per week	58.86								

Salary: The salary for this attachment is detailed to be a C run category