

Run Description – General Surgery Registrar (Non-Training) Health New Zealand | Te Whatu Ora

PLACE OF WORK:	Surgical Services
REQUIREMENT:	RMO PGY3 minimum
RESPONSIBLE TO:	Service Manager ED, Orthopaedics and RMOs
CLINICALLY REPORTS TO:	Clinical Supervisor / Registrar Supervisor
FUNCTIONAL RELATIONSHIPS:	<ul style="list-style-type: none"> • Head of Department • Clinical supervisor • Registrar supervisor • Healthcare consumer • Clinical and Non-Clinical staff • RMO Unit • Wider MDT • CMO
PRIMARY OBJECTIVE:	<p>To facilitate the management of patients under the care of the department of Surgical Services.</p> <p>The General Surgery/Vascular Department at Nelson Hospital provides comprehensive surgical services to the Nelson Marlborough region. The department covers a wide range of elective and acute general surgical and vascular procedures.</p> <p>Key features of the service include fully equipped operating theatres, endoscopy and interventional suites, and advanced diagnostic resources; a collegial team of General Surgery and Vascular consultants and Nurse Practitioners, registrars, and house officers; and opportunities to gain experience across a broad spectrum of surgical conditions and procedures. You will receive hands-on training in ward, clinic, and theatre skills, with the potential for increasing level of independence over the course of the year.</p>
RUN RECOGNITION:	To aid development and experience to be successful in obtaining Surgical training programme placements.

RUN ROTATION LENGTH:	6 Months
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Health New Zealand | Te Whatu Ora Nelson Marlborough

Our vision | Tō tātou manako: All people live well, get well, stay well. *Kaiao te tini, ka ora te mano, ka noho ora te nuinga.*

Our mission | Tō tātou kaupapa: Working with the people of our community to promote, encourage and enable their health, wellbeing and independence. *Kei te mahitahi tātou hei whakapiki te oranga me te motuhaketanga o to tatou hapori.*

Our Values – Ō tātou whanonga pono

Respect | Manaakitanga: We care about, and will be responsive to, the needs of our diverse people, communities and staff.

Kia horahia te manaakitanga ki ngā iwi katoa me ngā hāpori, kaimahi hoki.

Innovation | Auaha: We will provide an environment where people can challenge current processes and generate new ways of working

Section 1: RMO's Responsibilities

Area	Responsibilities
Administration	<ul style="list-style-type: none"> Comply with documentation standards as per Medical Council and Nelson Marlborough requirements. Be responsible for certifying death and complete appropriate documentation. Letters will be written to the patient's General Practitioner after each outpatient visit. The results of all investigations will be sighted, accepted and acted on accordingly. Registrars are expected to take an active part in monthly audit meetings. At the direction of the Head of Department, assist with operational research in order to enhance the performance of the Service. If absent due to unexpected circumstances (e.g. health, other) contact the RMO Unit (or Duty Manager directly if after hours) as well as the SMO to whom the registrar is clinically responsible in the absent duty. If not in a training programme be enrolled with Inpractice (MCNZ requirement).
General	<ul style="list-style-type: none"> The Registrar will supervise the work of the House Officer, with whom they will organise the investigation and management of patients under the care of the Department. The role includes care of inpatient and outpatients in the hospital. The Registrar will carry out ward rounds at the beginning and end of the day with the training registrar or house surgeon to assess and treat patients under the care of their supervising Consultants. Any clinical concerns will be escalated to the training registrar or

	<p>Consultant caring for the patient.</p> <ul style="list-style-type: none"> • Clinical skills, judgement and knowledge are expected to improve during the course of the attachment. • On a rostered basis from Monday to Friday 0800 to 1700 the non-training registrars will take the on-call phone to provide a contact point for GP's/specialists referring patients to the Surgical Specialty of their current run. On non acute weeks, you will take part in a roster of elective duties. • The Registrar will be part of a multi-disciplinary team providing care to patients within the Nelson/Tasman Region. • Participate in and supervise the discharge process, including communications with the family and General Practitioner. • During the after-hours shift the participants on the run will contribute to the acute cover of General Surgery, Vascular, Urology and ENT. • It is expected that 7777 call will be attended as per Policy. • Maintain a high standard of communication with patients, patients' families and staff. • Attend handover, team and departmental meetings as required. • Assist with teaching of other team members including students, nursing and allied healthcare professionals. • The results of investigations will be actioned appropriately and accepted before they are filed in the patient's notes. • The Registrar should at all times be supervised to a level appropriate to their skill and experience and should freely seek advice from their senior colleagues on management of patients. The Registrar supervisor should be approached about any difficulties they may be experiencing. • Documentation will be detailed, accurate and timely, signed and legible. • Obtain informed consent for procedures within the framework of the Medical Council guidelines and NM policies and procedures. • Clinical practice is to be based upon Treaty of Waitangi principles with a focus upon equity.
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Section 2: Training and Education

Education

- Through example and supervision the Registrar will actively contribute to the education of House Officers.
- On occasion, the Registrar may be requested to assist with the teaching of other healthcare workers and medical students.
- Registrars will actively contribute to departmental teaching and audit sessions.

Research

- A research project may be undertaken during the attachment.
- A research project at some point in the Registrars training is a requirement for fellowship training for the RACS.

There is a minimum of 4 hours per week non-clinical time to enable medical learning.

Section 3: Hours of work

The hours of work for the Registrar are:	
Ordinary hours of work are Monday to Friday	0800 – 1630
Long Day duty	0800 – 2230
Night duty	2200 – 0830
Weekends Day Duty	0800 – 2230
Weekends Night Duty	2200 – 0830
To facilitate the management of patients, all Registrars on the Surgical Registrar on-site roster will cover General Surgery, Vascular, Urology and ENT out of hours.	
The on-site and after-hours rosters are attached.	

Section 4: Cover

<i>Other Resident and Specialist Cover</i>
There are no designated relief roles in the Surgical RMO team. Within the established roster, RMOs are expected to work as part of one large team across General Surgery/Vascular. While a team structure will form the basis of the on-site working week, Registrars may be assigned to a different team/supervising SMO when clinical need requires a flexible approach to work.

Section 5: Hours & Salary Category

<i>Average Working Hours</i>		<i>Service Commitments</i>
Basic hours (Monday – Friday 0800 - 1630)	42.50	The service together with the support of the RMO unit will be responsible for drafting of any Rosters The RMO unit will finalise and publish the roster.
Rostered additional hours (inc. nights, weekends & long days)	9.96	
All other unrostered hours	7.91	
Total hours per week	60.43	

This attachment is a Category B (60-64.9 hours).

Section 6: Roster

The roster is provided as an attachment.

Section 7: Performance feedback

<i>RMO</i>	<i>Service</i>
<p>The RMO will:</p> <ul style="list-style-type: none"> • at the beginning of the run meet with their designated clinical supervisor to discuss goals and expectations for the run. • after any assessment that identifies deficiencies, implement a corrective plan of action in consultation with their supervisor. • at end of run complete a feedback assessment of the run. 	<p>The service will provide:</p> <ul style="list-style-type: none"> • an initial meeting between the Supervising SMO and RMO to discuss goals and expectations for the run. • collegial meeting to aid PDP, provide feedback, review and support. • the opportunity to discuss any deficiencies identified during the attachment. The SMO responsible for the RMO will bring these to RMO's attention and discuss and implement a plan of action to correct them.