

RUN DESCRIPTION

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| POSITION: | Palliative Medicine Registrar Community |
| DEPARTMENT: | 52 Beach Rd, Te Atatu Peninsula, Auckland |
| PLACE OF WORK: | Hospice West Auckland |
| RESPONSIBLE TO: | Palliative Medicine Specialist- Clinical Lead |
| FUNCTIONAL RELATIONSHIPS: | Hospice West Auckland (HWA) staff and patients and Whanau referred to HWA. Regional hospitals, Hospices and community-based healthcare workers. |
| EMPLOYMENT RELATIONSHIPS: | Employed by WDHB and on secondment for the duration of the run. |
| PRIMARY OBJECTIVE: | Involvement in the medical management of patients referred to HWA Palliative Care Services. |
| RUN RECOGNITION: | This run is recognised by the RACP and Australasian Chapter of Palliative Medicine as a training position for specialist qualification To fulfil the Community Hospice module requirements for advanced training for Fellowship of the Australasian Chapter of Palliative Medicine. |
| RUN PERIOD: | This run description applies to runs of 6 months duration. |

Background:

Hospice West Auckland (HWA) is the provider of Specialist Palliative Care Services for the greater West Auckland area for people who are experiencing a life ending illness.

Hospice West Auckland's primary objective is to provide quality specialist palliative care for patients, in consultation with their General Practitioners, and to provide specialist palliative care advice and expertise to colleagues and primary providers.

Patients eligible for specialist palliative care include those with active, progressive advanced disease. Their prognosis is limited and the focus of care is quality of life. There is a level of need that exceeds the palliative care of the primary team. These patients have a breadth and depth of need over and above the "ordinary". Extraordinary needs can be patient, carer or health team centred and the support required may be intermittent or continuous depending on the level of complexity and the rate of disease progression. Eligibility is based on need not diagnosis, and patients with either malignant or non-malignant diseases qualify for specialist palliative care.

Team members interface closely with other members of the interdisciplinary team in order to ensure that patients receive multi-dimensional care appropriate to their current needs. These needs may include elements within physical (tinana), psychological (hinengaro), social (whānau) or spiritual (wairua) domains.

HWA service has a close link with regional hospitals (North Shore Hospital, Waitakere Hospital and Auckland City Hospital) as well as with other community services (hospices, cancer society, district nursing services, private hospitals) providing specialist palliative care. Liaison with these services and the patient's general practitioner (GP) are routine.

Key Relationships:

Internal:

Hospice West Auckland Team

External:

- Patients, family/ whānau and caregivers
- General Practitioners
- Medical Specialists
- Generalist Health Providers
- Waitemata District Health Board
- Other local and regional palliative care provider

Section 1: Registrar's Responsibilities

| <i>Area</i> | <i>Responsibilities</i> |
|----------------|---|
| General | <ul style="list-style-type: none"> • To work within a learning environment to acquire new skills and knowledge of specialist palliative care from team members and the wider palliative community. • To complete training requirements during the rotation. • Understand the philosophy and objectives of Palliative Care and the Palliative Care Service and set goals for practice within this framework. • Work in a manner that demonstrates an awareness of and sensitivity to cultural diversity and the impact that may have on health goals unique to that patient. This requires an understanding of Māori health goals and working in accordance with the principles of the Treaty of Waitangi. It also requires an understanding of the different health needs of other minority ethnic groups, including needs that may be specific to Pacific Island and Asian peoples. • Work closely with members of the interdisciplinary team in provision of assessments, including investigations, for patients referred to the Community Palliative Care Team at Hospice West Auckland. • Work as part of an interdisciplinary team to implement and participate in a holistic approach to specialist palliative care. • Develop, and implement management plans for patients in collaboration with the patient, family, whānau and other members of the interdisciplinary team. • Undertake diagnostic and treatment procedures appropriate. • Monitor and review management plans in accordance with changes in the clinical condition of patients. • Maintain a high standard of communication with patients, patients' families and whānau. |

| <i>Area</i> | <i>Responsibilities</i> |
|----------------------------------|--|
| | <ul style="list-style-type: none"> • Provide quality palliative care advice to HWA team members, colleagues, primary care and aged residential care services. • Maintain a high standard of communication with Hospice, hospital and community health professionals and other staff. • Provide quality palliative care advice to HWA team members, colleagues, primary care GPs and aged residential care services (within scope and with guidance from SMOs). • Provide quality palliative care to patients in day programmes, community services and specialist palliative care settings, ensuring physical symptom management is of high standard and emotional and spiritual needs of patients and their families are met. • Attend scheduled interdisciplinary team review rounds, medical team and departmental meetings. |
| Outpatients/Home visiting | <ul style="list-style-type: none"> • Development and implementation of management plans in collaboration with the patient, family and members of the inter-disciplinary team. This will include appropriate diagnostic or treatment interventions. • Monitoring and review of management plans in response to complications or changes in patient's condition • All assessment summaries and management plans are documented in the patient's integrated health record and review and revisions are clearly evident. • Arrange and perform outpatient investigations and appropriate follow-up. • Document assessment summaries and management plans in patient's computerised clinical notes (Palcare). • Communicate with patient's GP and to other relevant community services and other healthcare professionals following consultation. |
| Administration | <ul style="list-style-type: none"> • Maintain a satisfactory standard of documentation in the files of patients (Palcare). All prescriptions and notes are to be signed, with a printed name legibly recorded. • All assessment summaries and management plans are documented in the patient's integrated health record and review and revisions are clearly evident. • Meet obligations regarding certification of death. |

Section 2: Weekly Schedule

The registrar's ordinary hours of work will be Monday to Friday 0800–1700. There is consultant presence during these hours.

In addition, the registrar will participate in the out of hours on call roster which will include working first on call on weeknights and over weekends. The registrar will also be available to provide phone advice both to nurses in the community palliative care team, GPs and other allied health providers as required.

The scheduled activities are shown below. In addition to activities shown in the weekly schedules (timetabling of which may be subject to change) the registrar will be allocated to clinical activities, non-clinical activities and four hours per week of protected training time. Timetabling of SMO rounds, clinical activities, non-clinical activities and protected training time may be subject to change.

| | Monday | Tuesday | Wednesday | Thursday | Friday |
|-------------|---|--|---|--|---|
| a.m. | 0830 Clinical Handover Home Visits | 8.00am OP meeting 8.30am Rapid Round Outpatients | 0830 – 0930 Interdisciplinary Team Meetings Clinical activities/Audit | 08.30 (6 weekly) Hui Tahi Round Outpatients | 0830 Clinical Handover Home visiting |
| p.m. | Home Visits | Outpatients | 1500 Journal club/Peer review (alternative weeks) 1300-1700 Protected/ Training time | Outpatients | Home visiting |

Clinical activities may include outpatient clinics, domiciliary visits, reading and responding to patient referral letters, multi-disciplinary meetings, audit and quality assurance activities, case conferences and reviews, research and study related to the treatment of a specific patient, telephone and other ad hoc consultations, community health promotion activities, discussions and meetings with care givers and patients' families, preparation of clinical reports.

Non-clinical activities may include teaching - (including preparation time), educational or personal supervision, service or department administration, research, planning meetings, preparation of educational resources, and preparation of clinical resources.

Section 3: Cover

There is one registrar on this run and there is a consultant available on 2nd call at all times.

Section 4: Training and Education

| Nature | Details |
|---|--|
| Protected Training Time | <ul style="list-style-type: none"> Protected training time of 4 hours per week will be allocated for CPE, professional self development, medical learning and to attend teaching sessions with training supervisor. This will include time for attendance at journal club |
| <p><i>The Registrar is expected to:</i></p> <ul style="list-style-type: none"> <i>contribute to the education of nursing, technical staff and medical staff when requested.</i> <i>Undertake education / training programmes or attendance at conferences as part of ongoing professional development.</i> <i>Participate in relevant Continuing Medical Education (CME) activities, or equivalent. Attend relevant national conferences / symposia when possible.</i> <i>Participate in One to Ones and annual performance and review activities.</i> <i>Participate in peer group support and attend regular supervision when possible.</i> <i>Where appropriate, develop research initiatives, taking into account resource/budgetary constraints.</i> | |

Section 5: Performance appraisal

| <i>Registrar</i> | <i>Service</i> |
|---|--|
| <p><i>The Registrar will:</i></p> <ul style="list-style-type: none"> • At the outset of the run meet with their supervising consultant or designated consultant if supervising consultant is not available to discuss goals and expectations for the run, review and assessment times, • After any assessment that identifies deficiencies, implement a corrective plan of action in consultation with their supervising consultant or designated consultant if supervising consultant is not available | <p><i>The service will provide:</i></p> <ul style="list-style-type: none"> • A suitable work and training environment that will foster excellence in patient care and support high quality education. • An initial meeting between the supervising consultant (or designated consultant if supervising consultant is not available) and registrar will be arranged to discuss goals and expectations for the run, review and assessment times. • An interim assessment report will be provided midway through the run after discussion between the registrar and the supervising consultant (or designated consultant if supervising consultant is not available). • A final assessment report will be provided at the end of the run, a copy of which is to be sighted and signed by the registrar. • The opportunity to discuss any deficiencies identified during the attachment will be available at any time. The supervising consultant (or designated consultant if supervising consultant is not available) in conjunction with the registrar will discuss and implement a plan of action to correct identified deficiencies. |

Section 6: Hours and Salary Category

| <i>Average Working Hours</i> | | <i>Service Commitments</i> |
|---|-----|---|
| Basic hours (Mon-Fri) | 40 | The Service, together with the RMO Support Unit will be responsible for the preparation of any Rosters. |
| Rostered additional hours (inc. nights, weekends & long days) | 5 | |
| All other unrostered hours | TBC | |
| Total hours per week | 45 | |
| *Plus rostered on call (1 night per week, one weekend per month) | | |

Salary The salary for this attachment will be as detailed in a Category **E** run category.