Health New Zealand
Te Whatu Ora

Run Description

POSITION:	Psychiatric Registrar
DEPARTMENT:	Mental Health & Addictions
PLACE OF WORK:	Hawke's Bay Hospital – may be required to attend outpatient clinics in peripheral units within the Health NZ Hawkes Bay catchment
RESPONSIBLE TO:	Clinical Director and Manager, through a nominated Consultant/Physician
FUNCTIONAL RELATIONSHIPS:	Healthcare consumer, hospital and community-based healthcare workers
PRIMARY OBJECTIVE:	To facilitate the management of patients under the care of the Psychiatric Service
RUN RECOGNITION:	Medical Council of New Zealand & Royal Australian and New Zealand College of Psychiatrists
RUN PERIOD:	6 – 12 months

Section 1: House Officer's Responsibilities

Area	*Responsibilities*
General	**CLINICAL RESPONSIBILITIES AND DUTIES** • The RMO is responsible for the day-to-day management of inpatients under the care of their designated specialist or senior dentist. The management of all inpatients under the team's care will be reviewed on a daily basis Monday through Friday. • Working under direction and supervision of a Senior Medical Officer, undertakes assessments, makes diagnoses and develops treatment and management plans in consultation with patient/whanau. Details of supervision arrangement will vary depending on the specific run. • Providing ongoing psychiatric review and management. • Maintaining patient records including assessment and risk documentation, discharge documentation and prompt provision of discharge summaries and forms. • Participation in MDT meetings and clinical review meetings. Participation in case discussions and contributes to ongoing treatment plans. • Participation in the after-hours on-call roster.

Area	*Responsibilities*
	• Participation in family/whanau meetings; ensuring that patients and, where revevant, relatives/friends receive adequate education and explanation about their illness and its management. Refer to Code of Patient Rights and Privacy Act as guidelines. • Providing advice (as appropriate) to other medical and non-medical clinicians. • Providing urgent and crisis assessments. • RANZCP training registrars are required to complete RANZCP learning requirements during their rotation in order to meet the Fellowship competency requirements for their stage of training. • The Registrar will ensure that when going off on duty any patient whose condition is unstable or of concern, is notified to the appropriate on call doctor at handover. • The Registrar shall assist with consultations from other Specialists and from General practitioners in conjunction with their Consultant. • The Registrar shall attend clinical meetings where required including Case Presentations/Medical meeting, Grand Round and will be expected to contribute as requested by their consultant. **FOR THE WHOLE TEAM** • Registrars are responsible to their supervising Consultant Psychiatrist. • Registrars are required to attend all timetabled and rostered duties punctually. • At the commencement and partway through each 6-month run the registrar must arrange a time to meet with their supervisor, who will advise the registrar of the supervisor's preferences, discuss training, give feedback on progress and agree goals. Registrars will ensure that referring specialists/GPs are directly contacted regarding significant clinical events of their patients.
On call duties	Duties of After-Hours Registrars Registrars undertake after-hours and emergency duties, supporting the Emergency mental health team. RANZCP training registrars will be rostered with a second on call psychiatrist. Registrars are responsible to liaise with the 'second on-call' psychiatrist when they undertake after-hours duties. It is expected that psychiatrists will be advised of all admissions in a timely manner, and that they will be consulted when assessing complex patients or if liaison with other units is required. Psychiatrists want and expect to be in attendance if you have any concerns about a clinical situation. They are required to attend at ANY TIME if requested by the registrar. The Registrar is required to CALL FOR PSYCHIATRIST SUPPORT IMMEDIATELY – • When there is an 'at risk' situation • When the work volume is excessive • Whenever in need! • Registrars are to call the consultant for assistance if a heavy workload causes delays in assessment of acute patients. After hours duties include: • Assessing patients as requested by the Emergency Mental Health Service • Admitting patients to Nga Rau Rakau promptly, in consultation with the Second on call (On-call consultant psychiatrist). It is expected that registrars assess patients comprehensively and have taken a history and examined the patient, rather than

Area	*Responsibilities*
	relaying information from someone else. Registrars will need to make it clear if they have not seen and examined the patient themselves. • Providing clinical advice and support to the Emergency Mental Health Team with support from second on call. • Following the Hawkes Bay DHB clinical protocols/guidelines • Communicating with referring doctor regarding assessment and management plans, as appropriate. • Keeping the second On-call Consultant informed. Undertaking Section 8(b) patient assessments under the Mental Health Act, as requested by the Duly Authorised Officer.
Administration	Registrars are required to fully document patient care. • Letters to other health professionals or agencies regarding assessments and treatment progress • Timely discharge summaries/letters • Medication orders, including prescriptions, medication updates and reasons for changes • Completion of any special documentation or database entry of health information as required by the Unit Consultant or Manager. • Participation in weekly team case conferences. • Follow up laboratory and other investigations as necessary, using electronic systems and other records as appropriate • Check and attend to email correspondence on your work email

Section 2: Training and Education

There is a minimum of 4 hours per week medical learning, which includes supervision, weekly tutorial, journal club and pathology session.

Registrar tutorial occurs fortnightly from 3.30pm – 4.30pm. Registrars are asked to select topics to study and present to their registrar colleagues. Consultants and SMOs are on occasion invited to present or observe presentations.

Journal club occurs on an alternate fortnight from 3pm – 4pm. This is a departmental meeting and registrars share the presentation schedule with Senior Medical Officers. Registrars are expected to present 1-2 times during a 6 month run to this group.

Two hours of self-directed learning on site is provided and needs to be arranged with the supervising consultant to ensure adequate clinical support to the acute unit remains in place.

Actively contribute to the education of trainee interns, medical students and other health care professionals in training who have been assigned to your team.

Teach other health care workers as requested.

Note: dates and times for the sessions may change.

Supervision	Supervision of RANZCP Stage 1 training registrars: • As specified in the RANZCP Policy and Procedure on Supervision, clinical supervision of trainees must be maintained at a minimum of 4 hours per week over 40 weeks for full-time trainees. • Of these hours, a minimum of 1 hour per week must be individual supervision of a trainee's current clinical work. Additionally, of the 4 supervision hours per week, at least 2 hours per week must be closer individual supervision outside ward and case review meetings for Stage 1 trainees. Supervision of RANZCP Stage 2 training registrars:

	• As specified in the RANZCP Policy and Procedure on Supervision, clinical supervision of trainees must be maintained at a minimum of 4 hours per week over 40 weeks for full-time trainees. • Of these hours, a minimum of 1 hour per week must be individual supervision of a trainee's current clinical work.
Assessment	• RANZCP training registrars will meet with the Psychiatry Training coordinator prior to the start of run to identify goals and discuss responsibilities. • RANZCP training registrars will undertake Workplace-based Assessments (WBAs) and Entrustable Professional Activities (EPAs) as per the RANZCP Policy and Procedure on WBAs and EPAs.

Section 3: Roster

Roster

Hours of Work

Ordinary Hours	Monday to Friday	0830-1700hrs or 0800-1630hrs run dependant
On Call	x1 Weekday (Mon-Thu)	1600-0800
On Call	1:4 Weekends	Fri 1600 – Mon 0800

Planned Leave

It would be greatly appreciated if leave can be applied for with as much notice as possible, preferably before the start of the run and before the roster is written. Notification of whether leave has been approved will be given within 2/52 as per MECA.

Unexpected leave

If a Registrar is unable to attend duties at short notice (e.g., due to sickness) the Registrar is required, as soon as the situation is apparent to both:

- Message the RMO Unit (e-text, email or x5808).
- Email the SMO Adminstrator - smoadminmhas@hbdhb.govt.nz

Timesheets

Electronic timesheets must be authenticated through the Payroll system – PAL$.

Section 4: Cover

Mental Health and Addiction Services overview

Ngā Rau Rākau Inpatient Unit
Ngā Rau Rākau is a 23-bed general adult acute inpatient facility that provides care to patients requiring admission to an acute psychiatric facility. The unit occasionally accepts, on a case by case basis, adolescents requiring inpatient treatment who are awaiting transfer to an adolescent inpatient unit; and old age psychiatric patients. The treating team comprises 2 consultant psychiatrists, 2 registrars and 2 house officers; mental health nurses, occupational therapists, social workers and a kaitakawaenga. Adolescent patients are managed by the Child and Adolescent psychiatrists. Old age patients receive input from the Old Age Psychiatrists.

Adult Mental Health Services

Mental Health and Addictions treatment is delivered through the Napier and Hastings Community Adult Mental Health and Addiction Services, Opioid substitution treatment service, Home based treatment, Emergency Mental Health Services, Ngā Rau Rākau acute inpatient unit, Springhill Rehabilitation program, Maternal mental health services and Te Ara Manapou Pregnancy and Parenting Service and Consultation Liaison to the general hospital.

A Kaupapa Maori Mental Health Service is provided in collaboration with an NGO partner.

Mental Health services work closely with primary care and NGO providers to create individual care packages for patients. Specialist services such as forensic mental health care and eating disorders service are provided on a regional basis.

Community Mental Health and Addiction Services

The Community Mental Health teams comprises clinicians from a variety of disciplines including Consultant Psychiatrist/Senior Medical Officers, a general practitioner with a special interest in mental health and addictions, clinical psychologists, mental health nurses, occupational therapists and clinical social workers, a Pou Arahi and addiction workers. The Community Mental Health and Addictions services provide integrated care with the Springhill rehabilitation program and Te Ara Manapou Pregnancy and Parenting Service.

The opioid substitution service provides treatment for opioid use disorders, initiating pharmacological treatment in a community setting and overseeing shared care with general practitioners; and a group program in partnership with Whatever It Takes Trust.

The Napier detoxification services provides assessment and treatment for a variety of substance use disorders. Detoxification settings include the community residential detoxification at Springhill and inpatient detoxification at Hawke's Bay hospital, and community detoxification in the patient's own environment.

The Complex dual diagnosis / Complex Co-existing problems services provides assessments, recommendations and time limited episodes of care to clients referred by Napier community mental and addictions clinicians and keyworkers.

Ngā Harakeke mai Rongokako - Child, Adolescent and Family Service

CAFS in Hawke's Bay is made up of a dedicated team of nurses, social workers, family therapists, occupational therapists, addictions counsellors, psychologist and psychiatrists. We have clinics in Napier, Hastings, Central Hawkes Bay and Wairoa and cover a range of disorders affecting our youth. We work in partnership with community organisations, schools, Ministry of Education, Oranga Tamariki, GP practices and NGOs.

We have a residential respite facility, Emerge, where our youth can take time out and get intensive help managing crises. Central Regional Health School assists our Youth to transition back to school after suffering from severe mental illness. Any of our youth needing admission are transferred to Rangatahi Adolescent Inpatient Services in Wellington.

Consultation Liaison Service

The consultation liaison service comprises a consultation liaison nurse, a consultation liaison registrar and a 0.3 FTE fly-in fly-out consultation liaison psychiatrist. The fly-in fly-out consultation liaison psychiatrist attends the hospital for one and half days fortnightly, and provides additional support via Zoom/phone – with a scheduled 1 hour meeting daily for the 8 days per fortnight the psychiatrist is not on site. The consultation liaison psychiatrist will be the registrar's clinical supervisor.

The consultation liaison service supports all general hospital wards including the Acute Assessment Unit. A second psychiatrist in the Older People's Mental Health Service provides on-site continuity as regards to training

issues and availability if the C/L specialist psychiatrist is not available. The OPMH psychiatrist acts as the primary supervisor for training purposes and the RANZCP.

Older Persons Mental Health Service

The OPMH team consists of a Consultant Psychiatrist, Medical Officers along with Psychologist, Occupational therapist, Social Workers and Nursing staff. The team is expanding. The focus of the service is in providing assessment, treatment and management for patients presenting with severe mental health disorders in later life and younger people with dementia.

GP's provide a primary care diagnostic service for patients with uncomplicated dementia. The team will see people with dementia where there are diagnostic challenges, comorbidities, complex behaviour. We see patients at home, in care homes, on the inpatient wards (both in the general hospital and joint working with the adult psychiatrists on the inpatient unit). There is a broad range of experience with at least 25 per cent of the referrals coming from the general hospital.

Patients are also referred with severe functional illnesses. We work closely with our medical colleagues to exclude or treat any underlying issues. Access to ECT is via the Adult Mental Health Service and the trainee would be encouraged to take on a role if they had an interest.

The team regularly provides education sessions for staff in the hospital and community. The team have students and there are lots of opportunities for teaching. We often work with carers who have no experience of mental health as well as with professional colleagues. The service gives the trainee the experience of targeting their teaching and understanding how to communicate information to different groups.

An interest in management is encouraged and there are opportunities for developing skills shadowing senior members of staff and developing the trainees governance planning skills. Research is encouraged and supported.

The team works closely with the geriatricians and are co located with them in AT&R. In patient beds are provided by the Mental Health Unit along with 2 beds in the geriatrician run rehabilitation ward providing broad experience of working with different specialities.

There are opportunities for working with different teams within the hospital and developing skills around cognitive assessment, encouraging dementia friendly working and improving access to care for our patient group.

Weekly supervision will be provided by the consultant. The trainee will be part of the team's governance and audit structures to ensure excellent clinical care for patients.

Emergency Mental Health Service (EMHS)

The Emergency Mental Health Service is community based and provides emergency response and assessment for people experiencing acute mental illness.

Every year at least one in five people will suffer a mental illness affecting the way they think, feel, behave or relate to others. Help is available 24/7 for people who have an urgent mental health need.

Waekura - Home Based Treatment (HBT)

This service provides an alternative to hospital admission for people over the age of 18, who are experiencing an acute episode of mental illness. Referrals are made though ECA following a face to face handover/discussion with a clinician from HBT. Clients must consent to this as support is in their home.

Purea nei - Emergency Mental Health Service (EMHS)

Emergency Mental Health Service provides a '24 hours a day 7 days a week' comprehensive assessment, diagnostic, planning and treatment service for persons experiencing a mental health emergency. Care and Treatment will be provided in accordance with both organizational and professional competencies and standards and will (where possible) involve whanau / families / support persons.

Mental Health and Addiction Services overview

Early Intervention Psychosis Team (EIP)

Early Intervention in Psychosis Service provides specialist services for young tangata whaiora aged between 16-25 years, who are experiencing a first episode of psychosis, with a duration of untreated psychosis of less than 2 years and not had any treatment for psychosis previously or has had treatment for less than 6 months, also there may not have been functional decline over the previous 12 months. We offer an up to two-year multi-professional service, by our team of Mental health nurse, occupational therapist and psychiatrist.

Mental Health Police Liaison Service (PLS)

The Police Liaison Service consists of a Clinical Nurse Specialist, Registered Nurses and Peer Support Workers. PLS provides timely assessment and brief intervention for individuals brought into Police Custody units; with the aim to support community wellbeing and reduce social harm that is caused by mental health and addiction issues. The service operates Mon- Sun between 0600 – 2230 hrs.

Te Tawharau

A crisis hub that shelters a multi-agency approach, we have linked mental health with police, General practice, MSD, our Kuapapa Maori partners Te Taiwhenua o Heretaunga and NGO's to approach crisis management in a holistic way. A team of clinicians, psychiatrist and peer support provide the multi-disciplinary assessment, crisis intervention plan and brief follow up, connecting people to services within the health and community sector. Supporting a long the journey to recovery.

Te Ara Manapou - Maternal Mental Health

The service's vision is to improve outcomes for pregnant women and parents of children under three who experience problems with substance abuse and are not meaningfully engaged with supportive services.

A key focus is ensuring children have a better start in life and therefore a more positive life trajectory.

To achieve this Te Ara Manapou will provide intensive support, focused on building on strengths and increasing resilience for the mother, partner, and her family/whanau along with supporting the complex needs and vulnerabilities that may exist.

To help support these individuals and their whanau, the service will foster collaboration between agencies designed to support these individuals, both within their communities and Te Whatu Ora Hawke's Bay services and acting as advocates and/or facilitators for clients where necessary.

Where appropriate Te Ara Manapou will support services and agencies, so that they might provide more effective collaborative support to these mothers and their whanau, and where needed help develop capability to work with this group.

We provide intensive real support to help mothers regain control of their lives by

- Meeting with mothers individually to help them better manage their addiction in their own home, and where appropriate work with the whole whanau/family, helping to strengthen relationships and better manage life.
- Together with the mother, co-ordinate community services so together we can be more effective in helping meet the whanau/family's needs.
- Together work with the mother to help achieve her goals to improve life for her unborn child or children.

For those referred to Maternal Mental Health, the focus is on providing assessment and appropriate treatment. This is to assist the Mother to become well and enable her to have a good attachment with her baby; strengthening their relationship for the future. It is difficult for a Mother to fully care for her baby if she is presenting with significant mental health problems and the attachment process can be disrupted.

Section 5: Performance appraisal

Registrar	*Supervising Consultant*
The registrar will: • 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.	The Supervising Consultant will conduct: • An initial meeting with the Registrar to discuss goals and expectations for the run, review and assessment times and one-on-one teaching time. • A 3-month review between the Registrar and the Supervising 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

Average Working Hours – NZRDA Run Category		Service Commitments
Ordinary Hours	40.00	The Service, together with the RMO Support will be responsible for the preparation of any Rosters.
Rostered Additional (inc. nights, weekends & long days)	2.5	
All other unrostered hours	2.78	
Total Hours	**45.28**	

Salary: The salary for this attachment will be detailed as a **Category E** run.
Call backs apply and are paid additionally

OURHEALTH HAWKE'S BAY

HE KAUANUANU RESPECT
ĀKINA IMPROVEMENT
RARANGA TE TIRA PARTNERSHIP
TAUWHIRO CARE

Our Vision

Te hauora o te Matau-a-Māui: Healthy Hawke's Bay

Excellent health services working in partnership to improve the health and wellbeing of our people and to reduce health inequities within our community.

Our Values

HE KAUANUANU RESPECT
Showing ***respect*** for each other, our staff, patients and consumers. This means I actively seek to understand what matters to you.

RARANGA TE TIRA PARTNERSHIP
Working together in ***partnership*** across the community. This means I will work with you and your whānau on what matters to you.

ĀKINA IMPROVEMENT
Continuous ***improvement*** in everything we do. This means that I actively seek to improve my service.

TAUWHIRO CARE
Delivering high quality ***care*** to patients and consumers. This means I show empathy and treat you with care, compassion and dignity.