

# RUN DESCRIPTION

<b>POSITION:</b>	House Officer
<b>DEPARTMENT:</b>	Paediatrics - Gastroenterology and Infectious Diseases
<b>PLACE OF WORK:</b>	Starship Hospital
<b>RESPONSIBLE TO:</b>	Heads of Department for Paediatric Gastroenterology and Infectious Diseases, through a nominated Consultant/Physician.
<b>FUNCTIONAL RELATIONSHIPS:</b>	Healthcare consumer, Hospital and community based healthcare workers
<b>PRIMARY OBJECTIVE:</b>	To facilitate the management of patients under the care of the Gastroenterology and Infectious Diseases Services.
<b>RUN RECOGNITION:</b>	This clinical attachment is accredited by New Zealand Medical Council for prevocational training
<b>RUN PERIOD:</b>	3 months

## Section 1: House Officer's Responsibilities

<i>Area</i>	<i>Responsibilities</i>
<b>General</b>	<ul style="list-style-type: none"> <li>• Daily ward rounds of patients with the assigned speciality Registrars or fellow.</li> <li>• Implement management and treatment for patients under supervision of the assigned speciality Registrar.</li> <li>• Arrange appropriate investigations and ensure follow up of results.</li> <li>• Legible notes are to be written in patients charts on a daily basis and when management changes are made. Entries must be dated, signed and have a legible printed name accompanying the signature.</li> <li>• In conjunction with the Registrar, ensure Weekend plans are formulated and in place.</li> <li>• Perform preoperative assessments for endoscopy patients on weekly elective list</li> <li>• Perform required procedures as necessary.</li> <li>• Liaise with other staff members, departments and health professionals in the management of patients.</li> <li>• Communicate with patients and their families about their concerns and facilitate their</li> </ul>

<i>Area</i>	<i>Responsibilities</i>
	<p>understanding of the medical issues involved.</p> <ul style="list-style-type: none"> <li>On discharge ensure appropriate follow up is in place, including written information where appropriate. A written discharge will be completed within a reasonable period of time and forwarded to the appropriate health professionals including the family doctor.</li> </ul> <p>All the above duties will be in conjunction with registrar and the consultant responsible for that patient.</p>
<b>Acute Call</b>	<ul style="list-style-type: none"> <li>The medical House Officer on acute call is available to the medical wards to review patients and to deal with medical problems as they arise.</li> <li>Admissions from the emergency department will be assessed. This involves taking a history, performing a physical examination, ordering appropriate investigations, referrals and procedures, and formulating a management plan in consultation with the Registrar and/or Consultant.</li> </ul>

## Section 2: Training and Education

<i>Regular Teaching Sessions</i>		
Starship House Officer Teaching	Tuesday	1300 – 1400
Starship Update	Wednesday	0800 – 0900
Starship Registrar Teaching	Thursday	1300 – 1400
FRACP Teaching	Thursday	1500 – 1700
Starship Grand Round	Friday	1300 – 1400

### Section 3: Roster

<i>Hours of Work</i>		
Ordinary Hours	Monday to Friday	0800 – 1600
Long Day	Monday to Friday	0800 – 2230
Weekend Long Day	Saturday and Sunday	0800 – 2230
Weekend ward round	Saturday and Sunday	0800 - 1600
Nights	Monday to Sunday	2200 - 0800

- Nights will be rostered in sets of 3 consecutive or 4 consecutive duties.
- There are seven Paediatric House Officer Relievers who will cover the duties of the House Officers on leave, night duties, sleep days and rostered days off (RDO).
- There are five sets of RDO's per week with three falling prior to the weekend worked and two falling after the weekend worked. One out of the five sets of RDO's each week does not abut a weekend free of duty. Each House Officer contributing to the roster will be rostered to one to two sets of RDO's not abutting a weekend free of duty per run. When allocating the RDO's, rest, recuperation and continuity for the House Officer/s, relieving House Officers and service requirements will be taken into consideration.

### Section 4: Cover

<i>Other Resident and Specialist Cover</i>
<p>There are 7 medical house officers; 2 general paediatrics and 1 each for cardiology, respiratory, oncology, gastroenterology / infectious diseases and renal / rheumatology / immunology / endocrinology. In winter months an additional house officer is employed in general paediatrics.</p> <p>There are seven house officer relievers to cover leave for night duties and annual leave.</p> <p>There are 11 subspecialty registrars; 2 cardiology, 2 respiratory, 2 oncology, and 1 each for endocrinology, gastroenterology, neurology / developmental, renal / rheumatology, and infectious diseases / immunology.</p> <p>There are 4 general paediatric registrars, and 1 registrar each for Te Puaruruhoe, consult liaison, and outpatients.</p> <p>There are 2 subspecialty relievers to cover leave for night duties and annual leave.</p> <p>The general paediatric registrars cover leave internally with a rotating relief roster worked one in four. This cover includes Te Puaruruhoe.</p> <p>The consult liaison and outpatient registrar require no cover for night shift or leave.</p>

## Section 5: Performance appraisal

<i>House Officer</i>	<i>Service</i>
<p>The House Officer will:</p> <ul style="list-style-type: none"><li>• At the outset of the run meet with their designated Clinical supervisor to discuss their learning objectives and expectations for the run, review and assessment times, and one on one teaching time.</li><li>• After any assessment that identified deficiencies, implement a corrective plan of action in consultation with their Clinical Supervisor.</li></ul>	<p>The service will ensure:</p> <ul style="list-style-type: none"><li>• An initial meeting between the Clinical Supervisor and House Officer to discuss learning objectives and expectations for the run, review and assessment times, and one on one teaching time;</li><li>• A mid-run meeting and assessment report on the House Officer six (6) weeks into the run, after discussion between the House Officer and the Clinical Supervisor responsible for them;</li><li>• The opportunity to discuss any deficiencies identified during the attachment. The Clinical Supervisor responsible for the House Officer will bring these to the House Officer's attention, and discuss and implement an agreed plan of action to correct them;</li><li>• An end of run meeting and final assessment report on the House Officer, a copy of which is to be sighted and signed by the House Officer.</li></ul> <p>For PGY 1 and PGY 2 end of run meetings and assessments will be documented electronically via e-port.</p>

## Section 6: Hours and Salary Category

Summer:

<i>Average Working Hours</i>		<i>Service Commitments</i>
Basic hours (Mon-Fri)	40	Together, The Service with the RMO Support Unit will be responsible for the preparation of any Rosters.
Rostered additional hours (inc. nights, weekends & long days)	11.84	
All other unrostered hours	6.84	
Total hours per week	58.68	

**Salary:** The salary for this attachment is estimated to be a Category **C**

Winter:

<i>Average Working Hours</i>		<i>Service Commitments</i>
Basic hours (Mon-Fri)	40	Together, The Service with the RMO Support Unit will be responsible for the preparation of any Rosters.
Rostered additional hours (inc. nights, weekends & long days)	11.39	
All other unrostered hours	3	
Total hours per week	54.39	

**Salary:** The salary for this attachment is estimated to be a Category **D**