

RUN DESCRIPTION

POSITION:	House Officer
DEPARTMENT:	Mental Health Services for Older Adults, Speciality Medicine & Health of Older People Division
PLACE OF WORK:	Kingsley Mortimer Unit, [Psychogeriatric Inpatient] North Shore Hospital
RESPONSIBLE TO:	Director, RFMHS/MHS, Waitemata DHB Head of Division Medicine, SMHOP, Waitemata DHB General Manager, SMHOP, Waitemata DHB Clinical Director, Mental Health Services for Older Adults
FUNCTIONAL RELATIONSHIPS:	Health care consumers, hospital and community based mental health care workers.
PRIMARY OBJECTIVE:	To facilitate the care of patients in the Kingsley Mortimer Unit.
RUN RECOGNITION:	This clinical attachment is accredited by the New Zealand Medical Council for Prevocational Training.
RUN PERIOD:	13 Weeks

Section 1: House Officer's Responsibilities

<i>Area</i>	<i>Responsibilities</i>
Clinical Duties & Work Schedule	<p>House Officers will be responsible for the day to day management of patients, as follows:</p> <ul style="list-style-type: none"> To carry a caseload in consultation with the Registrar and Consultant. This will be somewhat smaller than the caseload carried by the team's registrar[s]. <p>For these patients:</p> <ul style="list-style-type: none"> To monitor, in conjunction with the Registrar, changes in the mental state of current patients. To maintain adequate clinical records, and complete referrals and discharge paperwork and summaries. To help arrange further psychosocial input and family meetings, together with the clinical team. To arrange basic medical care and investigations as appropriate. To liaise with the GP at admission and discharge, and otherwise as needed. <p>In respect of acute admissions [in those units where this applies] the House Officer will:</p> <ul style="list-style-type: none"> Consult with the Registrar [or the Consultant] about all patients for admission and may undertake initial assessment and examination, where this is felt to be appropriate. Consult with the Registrar or Consultant regarding any management or treatment plans before implementing these.

<i>Area</i>	<i>Responsibilities</i>
	The House Officer will be responsible for assisting as necessary with any medical emergencies.
Other Duties	<ul style="list-style-type: none"> This position will be part of the North Shore Hospital General Medicine after hours an call roster. General Medicine is part of the Acute and Emergency Medicine Division.
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; Obtain informed consent for procedures within the framework of the Medical Council guidelines which state: <ol style="list-style-type: none"> “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.” “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. If absent due to unexpected circumstances (e.g. health, other), contact the RMO Support Unit or the Duty Manager directly as well as the Consultant to which the House Officer is clinically responsible in the absent duty. As an RMO working at Waitemata DHB you will be provided with a Concerto login and a Waitemata DHB email account which will be used for all work related communication. It is your responsibility to ensure you check this regularly.

Section 2: Training and Education

<i>Nature</i>	<i>Details</i>
Protected Time	<p>Professional development of a House Officers skills and knowledge should occur during the run. All House Officers must attend their departmental meetings. The House Officer will attend the following weekly teaching (unless attendance is required for acute admitting or a medical emergency):</p> <ul style="list-style-type: none"> HO Teaching Programme- Thursday 1230 to 1430 hours, Conference Room 1, NSH and Kawakawa Room WTH (unless advertised otherwise). This is protected teaching time with the handing in of the pagers for monitoring by the Clinical Training Coordinator. Any urgent messages will be redirected to the team registrar. Practical Skills Training- Monday 1200-1400 hours, Seminar Room 1, Learning and Development, NSH (unless advertised otherwise). Consists of six different training modules run on a repeat cycle throughout the year. These modules have been designed to assist RMOs to maintain their skills in different ACLS procedures and practical skills. House Officers are expected to attend each module at least once during the training year. Grand Round is Tuesday 12.30 – 13.30 at North Shore Hospital. Medical Journal Club [W], Mondays 1230 Conf Room, Woodford House, Waitakere Hospital Mental Health Journal Club [W] Tuesdays 1330 Level 2, Waimarino, 33 Paramount Drive CME Thursdays 1200 Judges Room, Rata Unit, Mason Clinic

	<ul style="list-style-type: none"> • Teaching Roster [N/W] Wednesdays 1500, Judges Room, Rata Unit, Mason Clinic • Journal Club Mondays 1215 Community Room, Mason Clinic • Mental Health Journal Club [N] Fridays 0900, Level 3, 44 Taharoto Road • Mental Health House Officer Peer Support Group Tuesdays 1400 Judges Room, Rata Unit, Mason Clinic
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Section 3: Cover

<i>Other Resident and Specialist Cover</i>
<p>There are 2 House Officers and 1 Registrar employed in the Kingsley Mortimer Unit. There will be one House Officer working with a specialist Psychogeriatrician on each team. The Registrar works across both teams.</p> <p>There will be support from a Geriatric Registrar to review medical issues with patients for one session per week.</p> <p>This House Officer will take part in the general medical roster which involves 2 long days per week.</p> <p>When on duty after hours, the medical house officer responds to requests by nursing staff and other medical staff to assess and treat patients under the care of all the general medical and home and AT&R teams and wards. Therefore on duty house officer during evenings, nights and weekends provides ward cover for Medical and AT&R patients and any Medical Outliers. The house officer will work generically across General Surgery, Urology, Orthopaedics, General Medicine and Medical Specialties over this time, however work in their designated service wherever possible.</p> <p>Ward 12 (Kingsley Mortimer unit) cover: Medically related concerns after hours – on call mental health house officer reviews first and then refers to the on call medical registrar, as required.</p> <p>House Officers will be assigned a home team and supervisor, however are allocated to the Medicine service as a whole, with workload reviewed daily and shared across the service.</p> <p>Clinical attachments are to multidisciplinary teams. All doctors carry locators and many also have cell phones. Contact numbers are available via the North Shore exchange.</p>

Section 4: Roster

<i>Hours of Work</i>
<p><u>Ordinary hours of work</u></p> <p>08:00 - 16:30 Monday to Friday 08:00 - 22:30 Weekday long day 08:00 - 22:30 Saturday/Sunday Long Day 08:00 - 16:00 Saturday/Sunday Short Day 22:00 - 08:00 Night shift</p> <p>The House Officer will be assigned to MHSOA during ordinary hours, and after hours will predominately work across the Medicine service.</p> <p>This will include 2 long days (0800-2:30) per week.</p>

Section 5: Performance appraisal

<i>House Officer</i>	<i>Service</i>
<p>The House Officer will:</p> <ul style="list-style-type: none"> • 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 • After any assessment that identified deficiencies, implement a corrective plan of action in consultation with their Clinical Supervisor 	<p>The service will ensure:</p> <ul style="list-style-type: none"> • 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; • 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; • 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; • 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 • For PGY 1 and PGY 2 end of run meetings and assessments will be documented electronically via e-port.

Section 6: Hours and Salary Category

<i>Average Working Hours</i>		<i>Service Commitments</i>
Basic hours	40.0	
Rostered additional hours (inc. nights, weekends & long days)	16.45	
All other unrostered hours	2.61	
Total hours per week	59.06	

Salary: The salary for this attachment will be as detailed as a Category C run.