

RUN DESCRIPTION

POSITION:	House Officer
DEPARTMENT:	Newborn Services
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PLACE OF WORK:	Auckland City Hospital
RESPONSIBLE TO:	Clinical Director and Manager, through a nominated Consultant/Physician.
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FUNCTIONAL RELATIONSHIPS:	Healthcare consumer, Hospital and community based healthcare workers
PRIMARY OBJECTIVE:	To facilitate the management of patients under the care of the Newborn Service.
RUN RECOGNITION:	Medical Council &/or College recognition
RUN PERIOD:	3 months

Section 1: House Officer's Responsibilities

Area	Responsibilities		
General	Facilitate the management of inpatients commensurate with and appropriate to the house officer's skill level		
	 Manage the assessment and admission of infants under paediatrics care on the postnatal wards and neonatal intensive care unit. To undertake clinical responsibilities as directed by the neonatal registrar, fellowor consultant, also to organise relevant investigation and ensure that the results of the investigations are followed up and acted upon as necessary. 		
	• The postnatal ward round is done daily by the House Officer. There is a SMO assigned to postnatal wards for the week. fellow on level 2 does a ward round with the SHO on Tuesdays . The level 2 registrar or fellow is available to see babies at the request of the SHO The SMO assigned to the postnatal ward will generally attend the morning handover and will be available to review on babies at the request of the SHO. Be responsible for the daily review of infants under paediatrics care in the post natal wards (except on unrostered weekends).		
	 Maintain a high standard of communication with the parents and family of infants under paediatrics care and with staff 		
	• Communicate the status of the inpatients to senior members of the team (neonatal registrar, fellowor the postnatal ward consultant).		
	 Prepare required handover paperwork for weekends, including likely discharges over weekends or after hours 		
	STONZ - ADHB NICU House Officer Run Description - Effective 25 November 2019		

Area	Responsibilities		
	• Attend handover (morning and afternoon), team and departmental meetings as required.		
	 Assess patients referred to the neonatal team by other members of the team including obstetrics staff, midwives and staff nurses on the postnatal ward. 		
	• Attend deliveries at the request of the obstetrics services if carrying the level 1 neonatal pager. This includes instrumental and operative deliveries and all term deliveries where it is anticipated the newborn will need neonatal care following birth.		
	Organise appropriate investigations and follow-up for infants with antenatally diagnosed conditions, for example, antenatal renal pelvis dilatation.		
Acute admitting	 Infants referred to the neonatal team and requiring admission to the post natal ward. These are likely to be infants referred from the community, including Birth Care with jaundice requiring treatment or management of ongoing weight loss. 		
On-Duty	When rostered on duty, be at the recognised workplace to carry out assigned duties		
Administration	• Be responsible for record keeping, including patient notes and discharge letters and other documentation, written and maintained by the house officer. Ensure that notes are written legibly and signed, with a printed name and phone number.		
	• Provide a clinical summary and prescription, as required upon discharge for all patients under the care of the neonatal team, and being discharged from the postnatal wards.		

Section 2: Training and Education

	Monday	Tuesday	Wednesday	Thursday	Friday
Am		1130-1230 Neonatal Grand Round	08:00-09:00 Paediatric Update (SSH) 09:00- 1000Neonatal radiology	08:00-08:30 Fetal Medicine (SSH Radiology Conference Room)	
Pm	1300-1400 Monday Neonatal Teaching		conference	1230-1330 Neonatal Journal Club (13:00-14:00 Starship Grand Round (1230-1400 hours Perinatal Mortality Meeting-Monthly

Note: dates and times for the sessions above may change.

There is a minimum of 2 hours per week medical learning, which includes the weekly tutorial, journal club, radiology conference and grand round. House Officers are also encouraged to attend the Grand Round at Starship Childrens Hospital (Friday 1300 hours),

Section 4: Cover:

Other Resident and Specialist Cover

There is one House Officer on this roster. Leave cover is provided by the Obstetrics and Gynaecology relief house officer

Section 5: Cover:

		Roster		
Hours of Work				
Monday to Friday Saturday and Sunday	Normal Day Acute Call	0830-1630 hours 0830-2130 hours	8 hrs 13 hrs	
The House Officer will work 1:3 weekends.				
Handover time of 30 minutes twice daily is included in the hours allocated to each shift.				

Section 6: Performance appraisal

House Officer	Service
The House Officer will:	The service will provide:
 At the outset of the run meet with the designated Clinical supervisor or the clinical director to discuss goals and expectations for the run, review and assessment times and teaching. After any assessment that identifies deficiencies, implement a corrective action plan in consultation with the Clinical supervisor 	 An initial meeting between the Consultant and House Officer to discuss goals and expectations for the run, review and assessment times and teaching. An interim assessment report on the House Officer 6 weeks into the run, after discussion between the House Officer and the Consultant responsible. The opportunity to discuss any deficiencies identified during the attachment with the Consultant concerned. A final assessment report on the house Officer at the end of the run, a copy of which is to be sighted and signed by the House Officer.

Section 7: Hours and Salary Category

Average Working Hours		Service Commitments
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)	10.4	
All other unrostered hours	0	
Total hours per week	50.4	

Salary The salary for this attachment has been calculated as a Category **D** run, however a minimum of a Category **C** will appl.