

# RUN DESCRIPTION

<b>POSITION:</b>	House Officer - ENT
<b>DEPARTMENT:</b>	Paediatrics - Ear, Nose and Throat (ENT)
<b>PLACE OF WORK:</b>	Starship Hospital
<b>RESPONSIBLE TO:</b>	Clinical Director and Manager, 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 Paediatric ENT Service.
<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>• Elective and acute admissions will be assessed. This includes history taking, performing a physical examination, ordering appropriate investigations, referrals and procedures, and formulating a management plan in consultation with the Registrar and/or Consultant.</li> <li>• Daily ward rounds reviewing patients with the ENT Registrar.</li> <li>• Implement management and treatment for patients under supervision of the ENT 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> </ul>

<i>Area</i>	<i>Responsibilities</i>
	<ul style="list-style-type: none"> <li>• In conjunction with the ENT Registrar, ensure weekend plans are formulated and in place.</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 understanding of the medical issues involved.</li> <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> <li>• All the above duties will be in conjunction with registrar and the consultant responsible for that patient. Where appropriate the registrar will supervise junior staff and help them with problems as needed.</li> </ul>
<b>Acute Call</b>	<p>The surgical House Officer rostered on acute call is available to the surgical services wards to review patients and to deal with medical problems as they arise.</p> <p>While on call the surgical House Officer will carry the acute trauma locator and attend trauma calls. They are expected to take the history and help the trauma team where possible.</p>

## Section 2: Training and Education

<i>Training and Education</i>		
<p>There is a minimum of 2 hours per week medical learning, which includes the weekly tutorial and pathology session.</p>		
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

#### *Other Resident and Specialist Cover*

- The hours of work of the Paediatric House Officers are as follows;

Ordinary Hours	Monday to Friday	0730-1600
Long Day	Monday to Friday	0730-2230
Weekend ward round	Saturday & Sunday	0730-1300
Weekend long day	Saturday & Sunday	0730 - 2230
Night Duty	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).
- Additional cover will be provided through the payment of additional duties and locum rates as required.
- 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:

#### *Other Resident and Specialist Cover*

- There are 6 Consultant ENT Paediatric Surgeons, 1 Paediatric ENT Surgical Registrar and 1 Paediatric ENT House Officer.
- There will be one Surgical Paediatric House Officer rostered on acute call outside ordinary hours; 1600 – 2230 weekdays, 0730 – 2230 weekends.
- Between 2200 and 0800 cover is provided by the Paediatric Night House Officer.
- Weekend ward round 0800 - 1600. The acute call House Officer doing the Orthopaedic ward round will, upon completion of this, join with the Neurosurgical Consultant/Registrar for the Neurosurgery ward round on ward 26A. This will usually commence between 0900-1000.

## Section 5: Performance appraisal

<i>House Officer</i>	<i>Service</i>
<ul style="list-style-type: none"><li>• The House Officer will:</li><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>	<ul style="list-style-type: none"><li>• The service will ensure:</li><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><li>• For PGY 1 and PGY 2 end of run meetings and assessments will be documented electronically via e- port.</li></ul>

## Section 6: Hours and Salary Category

**Summer:** (Quarter 1 and 4)

Average Working Hours		Service Commitments
Basic Hours	40.00	The Service, together with the RMO Unit will be responsible for the preparation of any Rosters.
Rostered additional hours	13.42	
All other unrostered hours	4.81	
<b>Total Hours</b>	<b>58.23</b>	

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

**Winter:** (Quarter 2 and 3)

Average Working Hours		Service Commitments
Ordinary Hours	40.00	The Service, together with the RMO Unit will be responsible for the preparation of any Rosters.
Rostered additional hours	13.37	
All other unrostered hours	3.00	
<b>Total Hours</b>	<b>56.37</b>	

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