

RUN DESCRIPTION

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| POSITION: | House Officer |
| DEPARTMENT: | Paediatrics – Orthopaedics |
| PLACE OF WORK: | Starship Hospital |
| 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 Paediatric Orthopaedic Service. |
| RUN RECOGNITION: | This clinical attachment is accredited by New Zealand Medical Council for prevocational training. |
| RUN PERIOD: | 3 months |

Section 1: House Officer’s Responsibilities

| <i>Area</i> | <i>Responsibilities</i> |
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| General | <ul style="list-style-type: none"> • Elective admissions will be assessed including 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. • Daily ward rounds reviewing patients with the Orthopaedic Registrars. • Implement management and treatment for patients under supervision of the Orthopaedic Registrars. • Request appropriate laboratory tests and sign and sign results for inpatients on Éclair and through ROERS. Notify abnormal results to the Registrar the same day. • 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. • In conjunction with the Registrar, ensure Weekend plans are formulated and in place. |

| <i>Area</i> | <i>Responsibilities</i> |
|-------------|---|
| | <ul style="list-style-type: none"> • Perform required procedures as necessary. • Liaise with other staff members, departments and health professionals in the management of patients. • Communicate with patients and their families about their concerns and facilitate their understanding of the medical issues involved. • 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. • All the above duties will be in conjunction with registrar and the consultant responsible for that patient. |
| Acute Call | <ul style="list-style-type: none"> • The Surgical House Officer on acute call is available to the surgical services wards to review patients and to deal with medical problems as they arise. • While on acute 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. |

Section 2: Training and Education

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| Starship House Officer Teaching | Tuesday, Wednesday | 1300 – 1400 |
| Starship Update | | 0800 – 0900 |
| Starship Registrar Teaching | Thursday | 1300 – 1400 |
| FRACP Teaching | Thursday | 1500 – 1700 |
| Starship Grand Round | Friday | 1300 – 1400 |

Section 3: Roster

| <i>Roster</i> | | |
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| The hours of work of the Paediatric House Officers are as follows: | | |
| Ordinary Hours | Monday to Friday | 0730 -1600 |
| Long Day | Monday to Sunday | 0730 - 2230 |
| Weekend ward round | Saturday & Sunday | 0700 - 1300 |
| Weekend long day | Saturday & Sunday | 0730 - 2230 |
| Night Duty | Monday to Sunday | 2200 - 0800 |
| <ul style="list-style-type: none"> • 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 9 Consultant Paediatric Orthopaedic Surgeons, 5 Paediatric Orthopaedic Registrars and 2 Paediatric Orthopaedic House Officers.
- Two House Officers are on for the respective surgical services wards during ordinary hours.
- There is one Paediatric Surgical House Officer rostered to acute call outside of ordinary hours which provides cover for all the surgical services; 1600 – 2230 week days, 0800 – 2230 week ends.
- Between 2200 and 0800 cover is provided by the Paediatric night House Officer.
- Weekend Ward round 0700 – 1300 The acute call House Officer doing the weekend Orthopaedic ward rounds will, upon completion of this, join the Neurosurgical Consultant/Registrar for the Neurosurgical WR on ward 26A. This will commence between 0900-1000.

Section 5: Performance appraisal

| <i>House Officer</i> | <i>Service</i> |
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| <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

Summer: (Quarter 1 and 4)

| 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 | 13.48 | |
| All other unrostered hours | 3.23 | |
| Total Hours | 56.71 | |

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 | 13.35 | |
| All other unrostered hours | 3.00 | |
| Total Hours | 56.35 | |

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