

# **RUN DESCRIPTION**

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POSITION:	Oral Health House Officer
DEPARTMENT:	Auckland Regional Hospital & Specialist Dentistry (HSD) and Oral and Maxillofacial Surgery (OMS)
PLACE OF WORK:	Auckland City Hospital, , Greenlane Clinical Centre, Middlemore Hospital and Regional Auckland Area
RESPONSIBLE TO:	Service Clinical Director, through a nominated Consultant of HSD or OMS as rostered
FUNCTIONAL RELATIONSHIPS:	Healthcare consumer, hospital and community based healthcare workers
	To support OMS registrars and consultants in ED, outpatient clinics, hospital wards and theatres in the delivery of high quality, comprehensive care to eligible patients who are under the care of OMS.
PRIMARY OBJECTIVES:	To support the delivery of high quality, comprehensive dental care to eligible patients who are under the care of HSD. This will involve the delivery of care from hospital and community outpatient clinics, emergency departments, inpatient wards and operating rooms across the Auckland region.
RUN PERIOD:	1 year

#### **Overview**

House Officers (HO)at ADHB will work across both Auckland Regional Hospital & Specialist Dentistry (HSD) and Oral and Maxillofacial Surgery (OMS).

This run description outlines the generic information in regards to the roster and pay category for the HO with separate appendices that detail the different responsibilities, weekly schedules, training and cover arrangements for the HO while working in HSD and OMS.

#### Section 1: Roster

#### Hours of Work

Ordinary Hours, Monday – Friday = 0700-1600 OMS and 0800-1700 HSD On Call Nights, Monday – Thursday = 1600-0800 on call off site On Call Friday = Ordinary hours as per OMS/HSD service then on call off site from 1600-0800 the following day On Call, Saturday and Sunday = on call off site 0800-0800 the following day

Note – when on call the House Officer must be available to attend the hospital within 30 minutes

	Week 1						
	M	Т	w	Т	F	S	S
a HSD	N	N	N	N	X	X	Х
Ь HSD						X	X
c HSD					16	X	Х
d HSD						Х	Х
e OMS						24	Х
fOMS	х					х	Х
Night Rotator						х	24
Reliever						х	Х

			Roster	Key			
		Normal Day	9 hours per da	y - commenci	ng 0700 Max Fa	ax, 0800 HSD	
N	1600 - 0800 on call off site						
16		08	00 – 1600 onsi	te / 1600 - 08	00 on-call, off s	site	
24			0800-	-0800 on-call	offsite		
X				off duty			

House Officers will rotate through HSDand OMS for 12-16 week blocks. In addition House Officers will also rotate through the night rotator and relief positions also for 12-16 week block as shown in the rotation schedule below.

	16 weeks	12 weeks	12 weeks	12 weeks
RMO a	HSD	HSD	OMS	Relief
RMO b	HSD	HSD	OMS	Relief
RMO c	HSD	OMS	Relief	HSD
RMO d	HSD	OMS	Relief	HSD
RMO e	OMS	Relief	HSD	HSD
RMOf	OMS	Relief	HSD	HSD
RMO g	Relief	HSD	HSD	OMS
RMOg	Relief	HSD	HSD	OMS

#### Section 2: Hours and Salary Category

Average Working Hours		Service Commitments
Basic hours (Mon-Fri)	40	
Rostered Additional Hours	5	The Services, together with the RMO Support Unit will be responsible for the preparation of any Rosters.
Unrostered Hours	2.22	Call back shall be paid in addition
Total hours per week	47.22	

**Salary** The salary for this attachment will be as detailed as a Category **E** rotation. Note: Call back shall be paid in addition to the Category E salary.

When allocated to rotator/relief the House Officer will be paid a C run category.

Please note - Total hours fall below the middle of the salary band therefore the run will be remunerated as a E run category until the unrostered hours can be confirmed by a run review.

# Appendix 1 – Oral and Maxillofacial Surgery (OMS)

#### Section 1: OMS House Officer's Responsibilities

Area	Responsibilities
Clinical	<ul> <li>Provide treatment and support for OMS patients under the direction and guidance of the OMS registrars and consultants, including:</li> </ul>
	Outpatients in ED or clinic
	Inpatients on the ward
	Obtaining informed consent for all procedures.
	Arranging investigations, preadmission and surgical bookings as directed.
	<ul> <li>Ensuring follow-up of results of investigations.</li> </ul>
	<ul> <li>Undertaking dental aspects of patient care as indicated or directed.</li> </ul>
	<ul> <li>Recording every patient event on Concerto (MAXFAX data sheet) for purposes of audit.</li> </ul>
	<ul> <li>Ensuring effective patient handover and transfer of care.</li> </ul>
	<ul> <li>Undertaking inpatient discharge administration; discharge summary, prescription, review appointment</li> </ul>
	Assisting in theatre as required).
	Participate in the on-call rota (as rostered).
	Attend ward rounds (as rostered).
	<ul> <li>Seek advice whenever the complexity of the patient's clinical situation is outside your scope or experience</li> </ul>

Area	Responsibilities
	• Understand and apply HSD infection prevention and control (IPC) policies and practices during all patient interactions and related activities, ensuring patient and staff safety and compliance with Dental Council NZ practice standards.
	• Maintain comprehensive contemporaneous clinical records for all patient interactions using ADHB patient information forms and platforms including <i>Titanium</i> and the <i>Regional Clinical Portal.</i>
	Maintain patient privacy and confidentiality in accordance with ADHB procedures and policy.
	Ensure clinical practice is within the prescribed New Zealand Dental Council Scope(s)     of practice.
	Comply with organisational policies and procedures and the Dental Council of New Zealand (DCNZ) Practice Standards.
	• Keep OMS registrars and consultants informed of all changes in treatment of their patients, especially if there is an unexpected event.
	Participate in clinical audit.
	Undertake other duties at the discretion of the OMS registrars and consultants.
Quality and communication	• Build relationships of trust and maintain high standards of communication with patients, guardians, patients' families/whānau and staff on matters related to patients under the care of OMS. This includes timely and appropriate written communication (eg. clinic and discharge letters), as appropriate with referrers.
	• Liaise with other staff members, departments, and General Medical and Dental Practitioners in the management of patients
	• Be aware of diversity and function effectively and respectfully when working with and treating people of different cultures. Culture is not restricted to ethnicity, but also includes (and is not limited to) gender, spiritual beliefs, sexual orientation, lifestyle, beliefs, age, social status or perceived economic worth.
	Have an understanding of and apply the principles of the Treaty of Waitangi.
	• Actively engage with, and where appropriate initiate, clinical audit, service improvement and research projects.
	Attend and participate in clinical and non-clinical meetings as directed.
	Strive for continuing improvement in all aspects of work.
Professional	• Maintain the highest standards of professional conduct in relation to patients, staff and the general public.
	• Work in a team-based manner with PPC's (Patient Pathway Co-ordinators) to ensure timely care and effective communication with patients and their whānau
	• Conduct team huddle meetings with clinical staff prior to the commencement of clinical sessions and when otherwise indicated.
	Identify own training and development needs to meet personal development requirements and Dental Council NZ practitioner requirements.
	Actively engage in HSD professional development and education activities including 'in- service' programmes.
	Maintain currency in all relevant ADHB mandatory training.
	Model behaviours that demonstrate ADHB values
	Understand patient acceptance criteria, level of service available and discharge criteria
	NZRDA ADHB Oral Health House Officer Run Description – Effective 2 <sup>nd</sup> February 2021

Area	Responsibilities
	and work within these constraints.
	• Demonstrate and promote a proactive commitment to workplace safety and health.
	• Understand and actively engage in workplace health and safety policies and procedures including the individual responsibilities under the Health and Safety at Work Act 2015.
	<ul> <li>Identify, mitigate and promptly report failures or risks to patients including in relation to infection prevention and control.</li> </ul>
	<ul> <li>Understand and apply the ADHB 'Code' system for managing incidents and in particular the management of a medical emergency.</li> </ul>
	Ensure incidents are managed and reported in accordance with ADHB policies and procedures

# Section 2: OMS Weekly Schedules (Indicative)

House Officers rotate through HSD and OMS runs that will be 16 weeks initially then three 12 week cycles.

#### OMS HO 1

- based at MMH
- attends wards, clinics and theatres
- cover acutes when OMS HO 2 off-site

#### OMS HO 2

- based at MMH but roams
- attend clinics and theatres at GCC and ACH
- cover acutes (ED) when at MMH

OMS	HO 1	Monday	Tuesday	Wednesday	Thursday	Friday
	Morning	MMH Acutes	MMH Theatre	MMH Acutes	MMH Database	MMH Acutes
WEEK A	Afternoon	MMH Clinic	MMH Clinic	MMH/GCC Non-clinical	MMH Clinic	MMH Acutes
	Morning	MMH Theatre	MMH Acutes	MMH Database	MMH Acutes	MMH Acutes
WEEK B	Afternoon	MMH Theatre	MMH Clinic	MMH/GCC Non-clinical	MMH Clinic	MMH Acutes
	Morning	MMH Admin	MMH Theatre	MMH Acutes	MMH Acutes	MMH Acutes
WEEK C	Afternoon	MMH Clinic	MMH Database	MMH/GCC Non-clinical	MMH Clinic	MMH Acutes
	Morning	MMH Clinic	MMH Acutes	MMH Acutes	MMH Admin	MMH Acutes
WEEK D	Afternoon	MMH Clinic	MMH Acutes	MMH/GCC Non-clinical	MMH Clinic	MMH Database

OMS	HO 2	Monday	Tuesday	Wednesday	Thursday	Friday
WEEK A	Morning	MMH Admin	MMH Acutes	GCC Clinic	MMH Acutes	ACH Theatre
	Afternoon	MMH Acutes	MMH Acutes	MMH/GCC Non-clinical	MMH Acutes	ACH Theatre
WEEK B	Morning	MMH Acutes	MMH Admin	MMH Acutes	MMH Acutes	MMH Acutes
	Afternoon	MMH Acutes	MMH Acutes	MMH/GCC Non-clinical	MMH Clinic	MMH Acutes
WEEK C	Morning	MMH Acutes	MMH Acutes	GCC Clinic	MMH Admin	ACH Theatre
	Afternoon	MMH Acutes	MMH Clinic	MMH/GCC Non-clinical	MMH Acutes	ACH Theatre
WEEK D	Morning	MMH Acutes	GCC Theatre	GCC Admin	MMH Acutes	MMH Acutes
	Afternoon	MMH Acutes	GCC Theatre	MMH/GCC Non-clinical	MMH Acutes	MMH Acutes

# **Section 3: OMS Training and Education**

Area	House Officer Responsibility	Service Responsibility
General	<ul> <li>Through example and supervision, actively contribute to the education of healthcare professionals regarding principles, knowledge and clinical skills relevant to the practice of dentistry.</li> <li>May be requested to teach other health care workers.</li> <li>Work toward publishing research project findings, case reports or service related material.</li> </ul>	<ul> <li>OMS and HSD service specific teaching (10 hours) early in the attachment</li> <li>OMS and HSD continuing professional development programme equating to a minimum of 2 hours education per week</li> </ul>

#### Section 4: OMS Cover:

Other Resident and Specialist Cover

There are two training registrars and one non-training registrar supporting OMS activities including on-call.

# **Section 5: OMS Performance appraisal**

House Officer	Service
The OMS House Officer's performance will be supervise	ed and appraised by the OMS SCD.
The House Officer will:	The service will provide:
<ul> <li>At the outset of the run meet the OMS SCD or delegated SMO to discuss expectations for the run.</li> <li>After any assessment that identifies deficiencies, implement a development plan of action in consultation with the SCD or delegated SMO</li> </ul>	<ul> <li>An initial meeting SCD and House Officer to discuss goals and expectations for the run.</li> <li>An informal assessment re progress will occur approx. 6 weeks into the run</li> <li>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.</li> </ul>

# Appendix 2 – Hospital & Specialist Dentistry (HSD)

# Section 1: HSD House Officer's Responsibilities

Area	Responsibilities
Clinical	<ul> <li>To provide dental treatment and support for HSD patients under the direction and guidance of senior dentists and Consultants, including:</li> </ul>
	<ul> <li>Provide individualised 'prevention focused' dental care to assigned patients including: initial assessments, development of diagnoses, problem lists and management plans, provide clinical care, undertake review and recall (when indicated).</li> </ul>
	<ul> <li>Provide care to patients presenting for relief of pain only clinics.</li> </ul>
	<ul> <li>Review and provide care for inpatients (as rostered).</li> </ul>
	<ul> <li>Obtain informed consent for all procedures.</li> </ul>
	<ul> <li>Assess patients assigned by the admitting senior dentist or consultant and undertake pre-admission processes and dental assessment for acute and elective patients.</li> </ul>
	<ul> <li>Organise diagnostic investigations and imaging in support of clinical activities, ensure the results are reviewed, accepted and follow-up actions are taken in a timely fashion (in consultation with the responsible senior dentist or consultant)</li> </ul>
	<ul> <li>Ensure detailed patient care treatment plans are in place to support the timely care of patients.</li> </ul>
	<ul> <li>Liaise as needed with hospital and community medical and dental practitioners and ancillary hospital staff in the management of patients, including community stakeholders (for example, Auckland Regional Dental Services).</li> </ul>
	<ul> <li>Ensure effective patient handover and transfer of care.</li> </ul>
	<ul> <li>Undertake (as directed) inpatient discharge administration including providing inpatients on discharge a clinical summary, prescription and follow-up appointment if so required in a timely manner.</li> </ul>
	$\circ$ Attend operating rooms (as rostered) to assist with the delivery of care.
	Participate in the on-call rota (as rostered).
	Carry out ward rounds (as rostered) and complete clinical records and follow up appointments as required.

Area	Responsibilities
	• Seek guidance and support where the complexity of the patient's clinical situation is outside the scope or experience of the house officer or where the needs of the patient would be better served with such guidance.
	<ul> <li>Understand and apply HSD infection prevention and control (IPC) policies and practices during all patient interactions and related activities, ensuring patient and staff safety and compliance with Dental Council NZ practice standards.</li> </ul>
	<ul> <li>Maintain comprehensive contemporaneous clinical records for all patient interactions using ADHB patient information forms and platforms including <i>Titanium</i> and the <i>Regional Clinical Portal.</i></li> </ul>
	<ul> <li>Maintain patient privacy and confidentiality in accordance with ADHB procedures and policy.</li> </ul>
	• Ensure clinical practice is maintained within the prescribed New Zealand Dental Council Scope(s) of practice for which she/he is registered.
	<ul> <li>Comply with organisational policies and procedures and the Dental Council of New Zealand (DCNZ) Practice Standards.</li> </ul>
	<ul> <li>To keep senior dentists and Consultants informed of all changes in treatment of their allocated patients, especially if there is an unexpected event.</li> </ul>
	<ul> <li>To participate in clinical audit and assist in the direction and management of patient services.</li> </ul>
	• To undertake other duties at the discretion of the senior dentists and Consultants.
Quality and communication	• Build relationships of trust and maintain high standards of communication with patients, guardians, patients' families/whānau and staff on matters related to patients under the care of HSD. This includes timely and appropriate written communication (eg. clinic and discharge letters), as appropriate with referrers.
	<ul> <li>Liaise with other staff members, departments, and General Medical and Dental Practitioners in the management of patients</li> </ul>
	• Be aware of diversity and function effectively and respectfully when working with and treating people of different cultures. Culture is not restricted to ethnicity, but also includes (and is not limited to) gender, spiritual beliefs, sexual orientation, lifestyle, beliefs, age, social status or perceived economic worth.
	Have an understanding of and apply the principles of the Treaty of Waitangi.
	<ul> <li>Actively engage with, and where appropriate initiate, clinical audit, service improvement and research projects.</li> </ul>
	Attend and participate in clinical and non-clinical meetings as directed.
	Contribute to the administrative and management aspects of HSD activities.
	Strive for continuing improvement in all aspects of work.
Professional	• Maintenance of the highest standards of professional conduct in relation to patients, staff and the general public.
	• Work in a team-based manner with assigned dental assistant and scheduler to ensure high quality care and communication with patients and their whānau
	<ul> <li>Conduct team huddle meetings with clinical staff prior to the commencement of clinical sessions and when otherwise indicated.</li> </ul>
	<ul> <li>Identify own training and development needs to meet personal development requirements and Dental Council NZ practitioner requirements.</li> </ul>
	Actively engage in HSD professional development and education activities including 'in- NZRDA ADHB Oral Health House Officer Run Description – Effective 2 <sup>nd</sup> February 2021

Area	Responsibilities
	service' programmes.
	Maintain currency in all relevant ADHB mandatory training.
	Model behaviours that demonstrate ADHB values
	• Understand patient acceptance criteria, level of service available and discharge criteria and work within these constraints.
	• Demonstrate and promote a proactive commitment to workplace safety and health.
	• Understand and actively engage in workplace health and safety policies and procedures including the individual responsibilities under the Health and Safety at Work Act 2015.
	<ul> <li>Identify, mitigate and promptly report failures or risks to patients including in relation to infection prevention and control.</li> </ul>
	<ul> <li>Understand and apply the ADHB 'Code' system for managing incidents and in particular the management of a medical emergency.</li> </ul>
	Ensure incidents are managed and reported in accordance with ADHB policies and procedures

Section 2: HSD Weekly Schedules (Indicative) House Officers rotate through HSD and OMS runs in a 16 and three 12 week cycles. Duties may involve working across multiple sites including but not limited to Auckland, Counties Manukau and Waitemata District Health Board facilities.

HSD DHO 1	Monday	Tuesday	Wednesday	Thursday	Friday
Morning	Outpatient clinic	Outpatient clinic	Outpatient clinic	Outpatient clinic	Outpatient clinic
Afternoon	Inpatient support	Outpatient clinic	Non-contact Clinical Support	Inpatient support	Outpatient clinic

#### Hospital & Specialist Dentistry

HSD DHO 2	Monday	Tuesday	Wednesday	Thursday	Friday
Morning	Outpatient clinic	Inpatient support	Outpatient clinic	Outpatient clinic Theatre	H&N MDM
Afternoon	Outpatient clinic	Inpatient support	Non-contact Clinical Support	Inpatient support	Inpatient support

HSD DHO 3	Monday	Tuesday	Wednesday	Thursday	Friday
Morning	Consultant clinic	Outpatient clinic	Outpatient clinic Consultant clinic	Outpatient clinic	Outpatient clinic
Afternoon	Consultant clinic	Outpatient clinic	Non-contact Clinical Support	Outpatient clinic	Outpatient clinic

HSD DHO 4	Monday	Tuesday	Wednesday	Thursday	Friday
Morning	Outpatient clinic	Consultant clinic	Outpatient clinic	Outpatient clinic	Outpatient clinic
Afternoon	Outpatient clinic	Consultant clinic	Non-contact Clinical Support	Outpatient clinic	Outpatient clinic

# Section 3: HSD Training and Education

Area	House Officer Responsibility	Service Responsibility
Area	<ul> <li>House Officer Responsibility</li> <li>Through example and supervision, actively contribute to the education of healthcare professionals regarding principles, knowledge and clinical skills relevant to the practice of dentistry.</li> <li>May be requested to teach other health care workers.</li> <li>Presentations and case studies to professional and interest groups when appropriate         <ul> <li>Actively participate in education sessions within HSD including the delivery of presentations as directed.</li> <li>Present to local dentists at the Auckland Dental Association meetings when appropriate</li> <li>Present at the annual New Zealand Society of Hospital &amp; Community Dentistry conference when appropriate</li> <li>For new graduates registration</li> </ul> </li> </ul>	<ul> <li>Service Responsibility</li> <li>HSD service specific teaching (10 hours) early in the attachment</li> <li>HSD continuing professional development programme equating to a minimum of 2 hours education per week</li> </ul>
	and participation in an appropriate mentoring	and a constant of a constant o

Area	House Officer Responsibility	Service Responsibility
	<ul> <li>programme, such as the New Zealand Dental Association Graduate Professional Development Programme</li> <li>Work toward publishing research project findings, case reports or service related material</li> </ul>	

#### Section 4: HSD Cover:

#### Other Resident and Specialist Cover

- $\circ$   $\;$  There are three accredited Registrar's supporting OMS activities including on-call.
- HSD senior dentists and Consultants will normally be available in the workplace during normal rostered clinics or will available by mobile phone and email to provide assistance. The number of house officers working on the roster will be 8.

There will be one House Officer rostered on call between the hours of 1700 and 0800 hours Monday to Friday. There will be one House Officer rostered on call between the hours of 0800 and 1700 hours for each day of the weekend and Public Holidays. These duties will be detailed in the HSD/OMS House Officer roster.

#### **Section 5 Performance appraisal**

House Officer	Service			
The House Officer's performance will be supervised and appraised regularly primarily by the supervising senior dentist/consultant on a rotational basis. This may include (but is not limited to) formal discussion and objective setting, informal (formative) feedback on an on-going basis and periodic formal House Officer and Consultant jointly-led review.				
The House Officer will:	The service will provide,			
<ul> <li>At the outset of the run meet with their designated senior dentist/consultant to discuss goals and expectations for the run, review and assessment times, and one-on- one coaching time;</li> </ul>	<ul> <li>An initial meeting between the senior dentist/Consultant and House Officer to discuss goals and expectations for the run, review and assessment times, and one-on-one coaching time;</li> </ul>			
• After any assessment that identifies deficiencies, implement a development plan of action in consultation with the senior dentist/Consultant.	<ul> <li>An interim assessment report on the House Officer six (6) weeks into the run, after discussion between the House Officer and the senior dentist/Consultant responsible for them;</li> </ul>			
	• The opportunity to discuss any development requirements identified during the attachment. The senior dentist / Consultant responsible for the House Officer will bring these to the House Officer's attention, and discuss and implement a plan of action to address them;			
	<ul> <li>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.</li> </ul>			