

# **RUN DESCRIPTION**

POSITION:	House Officer
DEPARTMENT:	Ophthalmology
PLACE OF WORK:	Greenlane Clinical Centre
RESPONSIBLE TO:	Clinical Director and Manager of Ophthalmology, through a nominated Consultant Surgeon.
FUNCTIONAL RELATIONSHIPS:	Healthcare consumer, Hospital and community based healthcare workers
PRIMARY OBJECTIVE:	To facilitate the management of patients under the care of the Ophthalmology 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

Area	Responsibilities
General	• The House Officer will assess all acute and "transfer" admissions to the service by taking a history, performing a physical examination, constructing a problem list and formulating a management plan in consultation with the Registrar and/or Consultant.
	• See assigned patients on a daily basis (Monday to Friday) during rostered hours.
	• Attend ward rounds as rostered or as required by Registrar and/or Consultant.
	• Attend outpatient clinics as rostered or as required by Registrar and/or Consultant.
	Attend Operating Room as required by Registrar and/or Consultant.
	<ul> <li>Implement treatment of assigned patients (including ordering and following up of any necessary investigations) under the supervision of the Registrar and/or Consultant.</li> </ul>
	• Perform required procedures as rostered or as directed by Registrar and/or Consultant.
	<ul> <li>Liaise with other staff members, departments and General Practitioners in the management of their patients.</li> </ul>
	• When on call duty outside ordinary hours of work, respond to requests by Nursing Staff and other members of Medical Staff to assess and treat inpatients under the care of other medical teams as detailed in the roster.
	• Clinical skills, judgement and knowledge are expected to improve during the attachment.
Administration	• Keep adequate and legible records in accordance with the hospital requirements and good medical practice, (daily on weekdays and whenever management changes are

Area	Responsibilities
	<ul> <li>made).</li> <li>Appropriate laboratory tests will be requested and results sighted and signed. Abnormal results will be notified to the Registrar and/or Consultant as soon as practicable.</li> <li>Communicate with patients and their families about patients' illness and treatment where appropriate.</li> <li>On discharge provide patients with a hand-written clinical summary and if required, a prescription and follow-up appointment.</li> </ul>

### Section 2: Training and Education

Clinically related educational activities will be included as part of the normal duties of the position. Unless rostered for acute admitting or required for medical emergency, the RMO shall be given the opportunity to attend.

### Section 3: Roster

- On call responsibilities will be 1:7 always with Consultant back up.
- The ordinary hours of work will be 0800 to 1600 hours Monday to Friday. Additional hours over and above the ordinary hours will be worked as set out in the roster.
- Cover for leave will be provided by the employer through the use of relievers from the surgical relief pool.

#### Section 4: Cover:

Other Resident and Specialist Cover

- The number of RMOs working on the roster will be 7.
- The number of House Surgeons working on the roster will be 3 as well as 3 non-training registrars.
- Consultants will be available on call to attend the workplace if necessary, on the following basis: available by telephone, cellphone or telepage and can attend the hospital within 30 minutes.
- Leave will be organised by the employer and is provided via the Relief House Officer allocation. Early leave application is helpful to assist in the appropriate allocation of relievers.
- There is a consistent workload Monday to Friday (ordinary hours) for 6 RMO's and daily staffing numbers will be maintained at this level. Remuneration will be as follows:
  - 6 FTE will be remunerated as per the salary category detailed in section 6 of the run description
    - 1 FTE will be remunerated as a relief run category which will be shared amongst the 6 RMO's contributing to the roster.

#### Section 5: Performance appraisal

House Officer	Service
The House Officer will:	The service will ensure:
• 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.	• 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;
<ul> <li>After any assessment that identified deficiencies, implement a corrective plan of action in</li> </ul>	• A mid-run meeting and assessment report on the House Officer six (6) weeks into the run, after

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House Officer	Service
consultation with their Clinical Supervisor.	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;
	<ul> <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> </ul>
	<ul> <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

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.
RDO Hours	- 2.29	
Rostered additional hours (inc. nights, weekends & long days)	8.79	
All other unrostered hours To be confirmed by run review	ТВС	
Total hours per week	46.50	

**Salary** The salary for this attachment will be as detailed in a Category **D** run category until confirmed by a run review.