



RUN DESCRIPTION

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| POSITION: | House Officer, Medical Relief |
| DEPARTMENT: | General Medicine, Cardiology, Mental Health, Older People's Health, Medical Specialties |
| PLACE OF WORK: | Auckland City Hospital |
| RESPONSIBLE TO: | Clinical Director and Manager RMO Support Unit, through a nominated Consultant. |
| FUNCTIONAL RELATIONSHIPS: | Healthcare consumer, Hospital and community based healthcare workers |
| PRIMARY OBJECTIVE: | To facilitate the management of patients under the care of Medical, Surgical and Cardiology services. While rostered for General Medicine, Medical Specialties, Older People's Health or Mental Health services after hours, this will include the facilitation of the management of patients under the auspices of the after hours team. |
| RUN RECOGNITION: | Recognised as Category C for the purposes of registration by the Medical Council of New Zealand |
| 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"> • Inform Facilitate the management of in-patients commensurate with and appropriate to the House Officers' skill level • Manage the assessment and admission of acute and elective patients under the care of the service. Undertake clinical responsibilities as directed by the Registrar and/or Consultant, also organise relevant investigations, ensure the results are followed up, sighted and signed • At the direction of the registrar, respond to requests by other health professionals to assess and treat in-patients under the care of other medical teams; • Be responsible, under the supervision of a Registrar and/or Consultant for reviewing in-patients on a daily basis; • Maintain a high standard of communication with patients, patients' families and staff; |

| Area | Responsibilities |
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| | <ul style="list-style-type: none"> • Inform consultants of the status of patients, especially if there is an unexpected event; • Liaise with other staff members, departments, and General Practitioners in the management of in-patients • Communicate with patients and (as appropriate) their families about patients' illness and treatment; • Attend hand-over, team and departmental meetings as required <p>While rostered for General Medicine, Medical Specialties, Older People's Health and Mental Health:</p> <ul style="list-style-type: none"> • Between the hours of 2200 - 0800 an "after hours team" is in operation. During this period of time House Officers work generically across General Medicine, Medical Specialties, Older People's Health and Mental Health Services (this includes the Te Whetu Tawera and Fraser MacDonald units) on a "first past the post system". <p>NB – Where 'team' is used in the run description, this applies to the team to which you are rostered for the run as well as any team to which you are assigned for after hours duties</p> |
| Other Duties | <ul style="list-style-type: none"> • Attend Outpatient and pre-admission clinics as required by the Registrar and/or Consultant |
| Admitting | <ul style="list-style-type: none"> • Assess patients assigned by the admitting Registrar. Take a history, perform a physical examination then formulate and initiate a management plan in consultation with the Registrar or Consultant |
| Administration | <ul style="list-style-type: none"> • Maintain a satisfactory standard of documentation in the files of patients. All prescriptions and notes are to be signed, with a printed name and locator number legibly recorded; • With the Registrar, be responsible for certifying death and complete appropriate documentation; <p>At the direction of the Clinical Director, assist with operational research in order to enhance the performance of the service</p> <ul style="list-style-type: none"> • Obtain informed consent for procedures within the framework of the Medical Council guidelines which state: <ol style="list-style-type: none"> 1. "The practitioner who is providing treatment is responsible for obtaining informed consent beforehand for their patient. The Medical Council believes that the responsibility for obtaining consent always lies with the consultant – as the one performing the procedure, they must ensure the necessary information is communicated and discussed." 2. "Council believes that obtaining informed consent is a skill best learned by the house surgeon observing consultants and experienced registrars in the clinical setting. Probationers should not take informed consent where they do not feel competent to do so." |

Section 2: Training and Education

| <i>Nature</i> | <i>Details</i> |
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| <i>Protected Time</i> | <p><i>The following educational activities will be regarded as part of normal duties (unless attendance is required for other duties such as acute admitting or a medical emergency)</i></p> <ul style="list-style-type: none">• House Officer Teaching Tuesday 1400-1700<ul style="list-style-type: none">• The House Officer may also attend the following training in working hours if approved by the Registrar of the service where the House Officer is on duty• General Medicine Journal Club – Monday 1215 –1300• Cardiology teaching – Wednesday 0730-0800• Medical Science Lecture and Physicians Grand Round – Thursday 1100-1300 |

Section 3: Roster

| <i>Details</i> |
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| <p><i>The House Office will be required to:</i></p> <ul style="list-style-type: none">• Cover all services as instructed by the RMO Support Unit.• Assist in providing cover for the “day” absence of a House Officer required to start night duty.• 14 days notice will be given of any planned cover, including any after hours, weekend or night duties.• Assist in Short Notice Relief at a frequency of 1:6 if required.• If not booked to cover planned leave or short notice relief, be available to cover unexpected absence between the hours of 0800-1600.• The number of House Officers on any roster will vary depending on the department or service assigned to.• The number of Registrars will vary depending on the department or service assigned to. |

Section 4: Performance appraisal

| <i>Details</i> |
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| <p>The House Officer will arrange 4 service reports from services in which the House Officer worked during the run and the reports will be sighted and signed by the House Officer.</p> |

Section 5: Hours and Salary Category

In accordance with clause 12.1.2b of the SToNZ MECA, where there are week days completely free from rostered duties (RDOs), these days shall not be counted in the ordinary hours calculation as part of the run category. This excludes sleep recovery days that fall Monday through Friday. This will apply in the following circumstances:

1. As per Appendix 3: Transition Provisions – Translation to the Salary Categories in Clause 12 of the SToNZ MECA, where an RMO joins SToNZ and the published roster has weekday RDOs and these will be observed
2. There are week day RDOs as part of the roster

Where this applies the category for the run is set out below:

| Average Working Hours - STONZ Run Category (RDO's are observed) | | Service Commitments |
|--|--------------|--|
| Ordinary Hours (Mon-Fri) | 40 | The Service, together with the RMO Support will be responsible for the preparation of any Rosters. |
| RDO Hours | -4 | |
| Rostered Additional (inc. nights, weekends & long days) | 11.71 | |
| All other unrostered Hours | 4.27 | |
| Total Hours | 51.98 | |

Salary: The salary for this attachment will be detailed as a Category D run category, however will be remunerated at a **Category A run**.

Where no weekday RDOs are observed, the following run category will apply:

| Average Working Hours - SToNZ Run Category (RDO's are worked) | | Service Commitments |
|--|--------------|--|
| Ordinary Hours | 40 | The Service, together with the RMO Support will be responsible for the preparation of any Rosters. |
| Rostered Additional (inc. nights, weekends & long days) | 11.71 | |
| All other unrostered hours | 4.27 | |
| Total Hours | 55.98 | |

Salary: The salary for this attachment will be detailed as a Category C, however will be remunerated at an **Category A run**