

RUN DESCRIPTION

POSITION:	House Officer
DEPARTMENT:	Obstetrics & Gynaecology
PLACE OF WORK:	Auckland City Hospital
RESPONSIBLE TO:	Clinical Director and Manager of National Women's Health, 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 the National Women's Health Service.
RUN RECOGNITION:	This run is recognised as a training position for the Diploma in Obstetrics and MRANZCOG.
RUN PERIOD:	3 months

Section 1: House Officer's Responsibilities

Area	Responsibilities
General	<ul style="list-style-type: none"> The House Officer will function as an important part of a clinical team lead by a Team Leader. Clinical responsibility will be to the Senior Medical Officers of that team through the team's Registrars; as well as to those of other teams with which the House Officer may be rostered from time to time. <p><i>The House Officer will attend acute and elective admissions to the department, construct a problem list and request basic investigations and discuss management plans with the Registrar/ Specialist</i></p> <ul style="list-style-type: none"> Inpatients will be attended daily on week days and the House Officer will be available for ward rounds performed by the Consultant and/ or Registrar (unless detained by a clinical emergency). The house officer will be available to attend patients at the request of the nursing staff within the hours rostered The House Officer will ensure hand-over of any relevant patient problems to the On Call team House Officer at the change of duty. The House Officer will ensure handover of patients back to their original team after the post-acute ward round following the House Officer's On Call day. The House Officer will attend the Labour and Birth Unit and Women's Assessment unit when rostered and admit patients and attend to any problems as requested by

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Area	Responsibilities
	<p>the Registrar and/ or Midwifery staff.</p> <ul style="list-style-type: none"> • The House Officer will attend outpatient Antenatal and Gynaecology Clinics as indicated by their Daily Schedules. (Promptly and for the duration thereof), to assess patient problems and initiate or review management plans and investigations in consultation with the Registrar/ Specialist. • Gynaecological surgery patients will be seen in the Pre-admission Clinic. The House Officer will assist in Theatre when requested by the Registrar/ Specialist or when indicated by the Daily Schedule. The House Officer is expected to assist at all caesarean sections unless required urgently elsewhere in the service.
Administration	<p><i>Legible notes will be written in patient charts in outpatient clinics, on admission, daily and whenever management changes are made</i></p> <ul style="list-style-type: none"> • On discharge, the House Officer will complete an electronic discharge summary as promptly for all gynaecology patients before discharge. Complicated postnatal patients being discharged should have a dictated letter sent to their GP and/or LMC. Patients will receive a copy of the clinical summary at discharge, ± prescription and/ or follow up appointment if required. • A letter will be dictated to the patient's GP after each Gynaecological outpatient visit and at their first Antenatal visit, and at any antenatal visit where there is a referral from an external practitioner.

Section 2: Training and Education

Details
<ul style="list-style-type: none"> • There will normally be 3 hours each week of education per week including ward meetings, Departmental CME, .Perinatal Mortality, and Registrar teaching. Diagnosis and treatment of common O&G problems will be discussed. • Opportunities are available for research and audit if a House Officer is interested

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Section 3: Roster

Details

- The ordinary hours of work will be 8 hours per day between 0800 and 1600 Monday to Friday. Night duties are shared and run from 2200 to 0800. After hours work runs from 1600 to 2230.
- No more than two House Officers should be on leave at any time except in exceptional circumstances, as approved by the Service Manager and Clinical Director, Women's Health.
- Cover for annual leave will be negotiated prior to leave being approved.
- All requests for educational leave are subject to approval by the Clinical Director and to authorisation by the General Manager of Women's Health.
- Applications for education leave must be submitted well in advance to facilitate cover arrangements

Section 4: Cover:

Other Resident and Specialist Cover

- There are 11 House Officers employed on the roster, plus 2 relief positions.
- A Registrar (usually two) will be resident in the hospital at all times and two Consultants always available on call to attend if requested (in the hospital from 0800-1700 weekdays, and on call-back at all other times).
- The Department employs a reliever to cover absence from work on planned leave. Annual leave cover is arranged on a 'first come first served' basis and applications for annual leave should be submitted as early as possible. Short-term sick absence is covered within the Department unless the reliever is available.
- The main role of the reliever is to cover the duties of the House Officer taking planned leave.
- The reliever may also be expected to cover Neonates, and the reliever's position is classified as Category A+ for salary purposes.

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Section 5: Performance appraisal

<i>House Officer</i>	<i>Service</i>
<p><i>The House Officer will:</i></p> <ul style="list-style-type: none"> • At the outset of the run meet with their designated consultant to discuss goals and expectations for the run, review and assessment times, and one on one teaching time; • After any assessment that identifies deficiencies, implement a corrective plan of action in consultation with their Consultant. 	<p><i>The service will provide,</i></p> <ul style="list-style-type: none"> • An initial meeting between the Consultant and House Officer to discuss goals and expectations for the run, review and assessment times, and one on one teaching time; • An interim assessment report on the House Officer six (6) weeks into the run, after discussion between the House Officer and the Consultant responsible for them; • The opportunity to discuss any deficiencies identified during the attachment. The Consultant responsible for the House Officer will bring these to the House Officer's attention, and discuss and implement a plan of action to correct them; • 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.

Section 6: Hours and Salary Category

<i>Average Working Hours</i>		<i>Service Commitments</i>
Basic hours (Mon-Fri)	40	The Service, together with RMO Support Unit will take responsibility for preparations of rosters.
Rostered additional hours (inc. weekends & long days)	16.91	
All other unrostered hours	3.91	
Total hours per week	60.82	

Salary The salary for this attachment will be as detailed in a Category **B** run category

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