



## **RUN DESCRIPTION**

<b>POSITION:</b>	House Officer – General Surgery
<b>DEPARTMENT:</b>	General Surgery
<b>PLACE OF WORK:</b>	North Shore Hospital
<b>RESPONSIBLE TO:</b>	Operations Manager General Surgery and ORL, & Clinical Director and Consultants Surgical Services
<b>FUNCTIONAL RELATIONSHIPS:</b>	Health Care Consumers, Hospital & community based health care workers
<b>PRIMARY OBJECTIVE:</b>	To facilitate the management of patients under the care of General Surgery
<b>RUN RECOGNITION:</b>	This run is recognised by the New Zealand Medical Council as a Category A run for registration purposes.
<b>RUN PERIOD:</b>	13 weeks

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

<i>Area</i>	<i>Responsibilities</i>
<b>Clinical Duties &amp; Work Schedule</b>	<p><b><u>WARD WORK REGULAR HOURS</u></b></p> <ul style="list-style-type: none"> <li>Attend and admit patients being admitted to the wards before surgery punctually at the times stated.</li> <li>To carry out with the Registrar a daily ward round of patients and a ward round with specialists at least three times per week.</li> <li>Within the scope of their own knowledge keep patients informed as to their progress, answer any questions relating to their illness and explain any new procedures. When this is outside the scope of their own knowledge refer questions to the Registrar or Consultant and make reasonable efforts to ensure they are addressed.</li> <li>Undertake to maintain reasonable dialogue with relatives (with permission of the patient) and answer questions relevant to the patient's illness or refer these to the Registrar or Consultant.</li> <li>Keep the Registrar and/or Specialists informed of problems as they arise on the ward or wherever else the HO may be caring for patients.</li> <li>Maintain a close working relationship with the nursing staff and respond appropriately and in a timely manner to their concerns and requests regarding patient care</li> </ul>

WDHB General Surgery House Officer Run Description- 30 January 2012

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Area	Responsibilities
	<ul style="list-style-type: none"> <li>• To undertake other duties as may be required from time to time by the Operations Manager General Surgery and ORL or the General Manager, Waitemata District Health Board.</li> <li>• To attend to additional clerical matters to do with patients such as screening laboratory reports, writing discharge summaries and death certificates. Write up progress notes on patients as appropriate.</li> <li>• Prepare the list of X-rays to be seen at the weekly X-ray Conference.</li> </ul> <p><b><u>ACUTE ASSESSMENTS</u></b></p> <ul style="list-style-type: none"> <li>• When on acute admissions (regular hours and afterhours) the House Officer will document history, examination findings and medication list in the Admission to Discharge planner and arrange basic investigations on acute patients. This may be as the first doctor to assess the patient or after Registrar review.</li> <li>• The House Officer will inform the Registrar of all acute admissions and assessments and as a shared responsibility with the Registrar formulate a management plan, document the plan and ensure it is implemented.</li> <li>• The House Officer will complete the acute assessment within a reasonable time frame.</li> <li>• In the event of pressure of other duties delaying this assessment they will notify the acute call Registrar.</li> <li>• If time permits the acute admitting House Officer will assist the ward call House Officer with their duties</li> </ul> <p><b><u>WARD WORK AFTER HOURS</u></b></p> <ul style="list-style-type: none"> <li>• The House Officer will respond to calls from nursing staff to attend to ward patients requiring medical input. Ward assessment and changes in management will be documented in the notes</li> <li>• Serious issues and major changes in management will be discussed with the acute call Registrar</li> <li>• If the Registrar is unavailable to see a sick patient within a reasonable time frame then the patient's consultant or on call consultant should be contacted by the house surgeon directly</li> <li>• If the patient is not on their team, the ward call House Officer will handover to the primary House Officer at the earliest opportunity regarding significant changes in that patient's status such as new complications, need for assessment by Medical registrars/HDU outreach or changes in medication.</li> <li>• To provide emergency care for patients after hours admitted under the ORL specialist.</li> <li>• After hours and at weekends the Surgical House Surgeon on duty will be responsible for Urology patients ward calls.</li> </ul>
<b>Administration</b>	<ul style="list-style-type: none"> <li>• 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</li> </ul>

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Area	Responsibilities
	<p>legibly recorded;</p> <ul style="list-style-type: none"> <li>• Be responsible for certifying death and complete appropriate documentation;</li> <li>• At the direction of the Clinical Director, assist with operational research in order to enhance the performance of the Service;</li> <li>• Obtain informed consent for procedures within the framework of the Medical Council guidelines which state: <ol style="list-style-type: none"> <li>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.”</li> <li>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.</li> </ol> </li> <li>• If absent due to unexpected circumstances (e.g. health, other), contact the RMO Support Unit or Duty Manager (if after hours) directly as well as the Senior Registrar or Consultant on the team.</li> <li>• As an RMO working at WDHB you will be provided with a Concerto login and a WDHB email account which will be used for all work related communication. It is your responsibility to ensure you check this regularly.</li> </ul>

## Section 2: Training and Education

Nature	Details
<p><b>Protected Time</b></p>	<p>Professional development of a House Officers skills and knowledge should occur during the run. All House Officers must attend their departmental meetings. The House Officer will attend the following weekly teaching (unless attendance is required for acute admitting or a medical emergency):</p> <ul style="list-style-type: none"> <li>• HO Teaching Programme- Thursday 1230 to 1430 hours, Conference Room 1, NSH and Kawakawa Room WTH (unless advertised otherwise). This is protected teaching time with the handing in of the pagers for monitoring by the Clinical Training Coordinator. Any urgent messages will be redirected to the team registrar.</li> <li>• Practical Skills Training- Monday 1200-1400 hours, Seminar Room 1, Learning and Development, NSH (unless advertised otherwise). Consists of six different training modules run on a repeat cycle throughout the year. These modules have been designed to assist RMOs to maintain their skills in different ACLS procedures and practical skills. House Officers are expected to attend each module at least once during the training year.</li> <li>• Attend the team Radiology and Pathology meetings (see the team timetable), and the weekly Departmental Audit meeting.</li> <li>• To attend the Department of General Surgery House Officer teaching Friday 1200 to 1300 hours.</li> </ul>

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### Section 3: Roster

#### Hours Of Work

##### Ordinary hours of work:

Monday to Friday      0730-1530 hours  
 Long day                0730-2230 hours  
 Night duty               2200-0800 hours

There will be 13 House Officers working on the surgical roster. This includes 10 General Surgery House Officers, 1 Urology and 2 Relievers. The Relievers will provide cover for nights and leave.

### Section 4: Performance appraisal

<i>House Officer</i>	<i>Service</i>
<p>The House Officer should meet with their team Consultant to discuss learning objectives at the commencement of the run using the Medical Council Form RP1.</p> <p>The House Officer will meet again mid run to discuss performance and establish that agreed learning objectives are being met, and to provide feedback using RP1 Form.</p> <p>If deficiencies are identified, the Consultant will identify these with the House Officer who should implement a corrective plan of action under the advice of their Consultant.</p> <p>The House Officer should ensure they meet with their consultant at the end of run to complete the RP2.</p> <p>For additional support and advice the House Officers should discuss with their Intern Supervisor.</p>	<p>The team Consultant to whom the RMO is attached will assess the performance of the House Officer and complete and forward a report to the Intern Supervisor, after discussion with the House Officer.</p> <p>The team Consultant will discuss learning objectives at the beginning of the run with the House Officer using the Medical Council Form RP1. The House Officer will meet again mid run to discuss performance and establish that agreed learning objectives are being met, and to provide feedback using RP1 Form.</p> <p>If deficiencies are identified during the attachment, the Consultant to whom the House Officer is responsible will bring these to the House Officer's attention and discuss how they may be corrected.</p> <p>The team consultant will meet with the House Officer again at the end of run to complete the RP2 and forward to the intern supervisor.</p> <p>The Intern Supervisor receives the quarterly reports on probationary house officers, completed by the team consultant, and provides formal reports to the Medical Council for registration purposes e.g. for probationary registrants seeking general registration.</p>

## Section 5: Hours and Salary Category

Average Working Hours		Service Commitments
Basic hours	40.0	
Rostered additional hours (inc. nights, weekends & long days)	16.83	
All other unrostered hours	8.60	
Total hours per week	65.43	

### Salary

The Salary for this attachment will be as detailed for an A run category.

The **Reliever** will perform the duties of the House Officer on nights or leave and be remunerated two categories above the team House Officers at an A++ category.