

RUN DESCRIPTION

POSITION:	Dental House Officer
DEPARTMENT:	Auckland Regional Hospital & Specialist Dentistry (HSD) and Auckland Regional Oral and Maxillofacial Surgery (OMS)
PLACE OF WORK:	Auckland City Hospital, Greenlane Clinical Centre, Startship Hospital, Middlemore Hospital, Buckland Road Dental Centre and Regional Auckland Area including private provider sites and those under contract
RESPONSIBLE TO:	Service Clinical Director, through a nominated Consultant of HSD or OMS as rostered
FUNCTIONAL RELATIONSHIP:	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
KON PERIOD:	

Overview:

Dental House Officers (DHO) at Te Toka Tumai Auckland will work across both Auckland Regional Hospital & Specialist Dentistry (HSD) and Regional Auckland 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 DHO while working in HSD and OMS.

Section 1: Roster

Hours of Work

- Ordinary Hours, Monday Friday 0700-1700 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 Run Description then on call off site from 1600-0800 the following day
- On Call weekend Short Day (Saturday and Sunday) 0700-1700
- On call weekend Evening/Night shifts from Saturday 1700-0800 Sunday and Sunday 1700-0800 Monday
- From Monday Friday a daily handover will occur between 1600-1700 hours in person at MMH. When rostered to Monday-Thursday on call nights the HO/NTR will come in from home and report for handover at MMH between 1600-1700. If rostered to Friday on call, clinics will where possible be

scheduled to end by 1500 to enable the HO/NTR to attend in person handover at MMH. In the event an in person handover cannot occur, calls will be forwarded to the RMOs personal phone using the call forward function.

• Saturday and Sunday handovers will occur in person at MMH circa 8am – please liaise with the Registrar on call to confirm.

Note –

 DHO clinical commitment will finish by 1500, if not located at MMH, to enable travel to MMH and handover to commence on-call at 1600

		N	ew Pr	oposed	d Roste	r <u>Temp</u>	late : 1	:7
		м	т	w	т	F	s	s
	OMS NTR	10	10	10	10	10	SD	SD
	OMS NTR	10	10	10	10	10	х	х
After Hours	OMS HO	10	10	10	10	N	NW	NW
	OMS HO	z	z	10	10	10	х	х
	OMS HO / Relief	R	R	R	R	R	R	R
	OMS HO	10	10	10	10	10	х	х
	OMS HO	N	N	N	N	z	z	z

- When on-call the DHO must be available to attend the hospital within 30 minutes

	Roster Key						
	Normal Day (OMS)	0700 - 1700					
	Normal Day (HSD)	0800 - 1700					
Ν	On Cal Nights Mon-Fri	1700 - 0800					
NW	Weekend On Call Nights	1700 - 0800					
SD	Weekend Short Day On Call	0700 - 1700					
Х	Rostered Day Off	-					

NOTE - On Call over a PH is for 24hrs 0800 - 0800

Rotating Relief

Each RMO contributing to the OMS on-call roster will take turns rotating into the relief position over their rotation. When rostered to relief, the designated RMO will provide cover for the on call afterhours of an OMS RMO on leave. If the reliever is not allocated to work any on-call weekday / weekend nights or on weekday sleep days, the reliever would be expected to be onsite during Monday to Friday for the normal working day 0700-1700.

						3 weeks			3 weeks			3 weeks			4 W	/eeks			3 weeks			
Week			1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18		
				Orientation		Block 1			Block 2			Block 3			-	ock 4			Block 5			
но	DHO 3	OMS HO	0	0	AH	AH	AH											AH	AH	AH		
но	DHO 4	OMS HO	0	0	AH	AH	AH	AH	AH	AH												
но	DHO 5	OMS HO	0	0	AH	AH	AH	AH	AH	AH	AH	AH	AH									
но	DHO 6	OMS HO	0	0	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH					
но	DHO 7	OMS HO	0	0	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH		
но	DHO 8	HSD	0	0				AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH		
но	DHO 9	HSD	0	0							AH	AH	AH	AH	AH	AH	AH	AH	AH	AH		
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				3 weeks			3 weeks			3 weeks			3 weeks			3 weeks			3 weeks			
Week			19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36		
				Block 6			Block 7			Block 8			Block 9			Block 10			Block 11			
HO	DHO 3	OMS HO	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH								
но	DHO 4	OMS HO	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH					
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но	DHO 6	OMS HO							AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH		
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Week			37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52				
				Block 12			Block 14			2 43 44 Block 15				Block 16				49 50 51 Block 17				
но	DHO 3	OMS HO				AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH				
но	DHO 4	OMS HO							AH	AH	AH	AH	AH	AH	AH	AH	AH	AH				
но	DHO 5	OMS HO										AH	AH	AH	AH	AH	AH	AH				
но	DHO 6	OMS HO	AH	AH	AH										AH	AH	AH	AH				
но	DHO 7	OMS HO	AH	AH	AH	AH	AH	AH										AH				
но	DHO 8	HSD	AH	AH	AH	AH	AH	AH	AH	AH	AH											
но	DHO 9	HSD	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH								
но	DHO 10	HSD	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH	AH					

DHOs will rotate through the OMS and HSD services. They will work an average of 31 out of 52 weeks within the OMS area, following an on-call roster template with blocks ranging from 3 to 15 weeks. For HSD, DHOs will work an average of 19 out of 52 weeks, with blocks lasting between 9 to 10 weeks, and there will be no after-hours shifts during this period. The remaining 2 weeks are allocated for orientation at the beginning of the rotation.

Section 2: Hours and Salary Category

Average Working Ho	urs	Service Commitments
Basic hours (Mon-Fri)	40.00	The Services, together with the RMO Support Unit will
Rostered Additional Hours	10.00	be responsible for the preparation of any Rosters.
Unrostered Hours To be confirmed by a run review	2.22	Call back shall be paid in addition
Total hours per week	52.22	

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

When allocated to Rotating Relief position the House Officer will be paid a **B** run category.

Appendix 1 – Auckland Regional Oral and Maxillofacial Surgery (OMS)

Section 1: OMS House Officer's Responsibilities

Area	Responsibilities
Clinical	• Provide treatment and support for OMS patients under the direction and guidance of the OMS registrars and consultants, including:
	Outpatients in ED or clinic
	Inpatients on the ward
	Obtaining informed consent for all procedures.
	Arranging investigations, preadmission and surgical bookings as directed.
	 Ensuring follow-up of results of investigations.
	 Undertaking dental aspects of patient care as indicated or directed.
	• Recording every patient event on Concerto (MAXFAX data sheet) for purposes of audit.
	 Ensuring effective patient handover and transfer of care.
	 Undertaking inpatient discharge administration; discharge summary, prescription, review appointment
	Assisting in theatre as required).
	• Participate in the on-call rota (as rostered).
	Attend ward rounds (as rostered).
	• Seek advice whenever the complexity of the patient's clinical situation is outside your scope or experience
	• 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 professional development and education activities including 'in- service' programmes as available across. Maintain currency in all relevant ADHB mandatory training.
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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.
• Identify, mitigate and promptly report failures or risks to patients including in relation to infection prevention and control.
• Understand and apply the ADHB 'Code' system for managing incidents and in particular the management of a medical emergency.
Ensure incidents are managed and reported in accordance with ADHB policies and procedures

Section 2: OMS Weekly Schedules (Indicative)

DHO will work an average of 31 out of 52 weeks within the OMS area, following an on-call roster template with blocks ranging from 3 to 15 weeks.

OMS HO

- based at MMH but roams
- attend wards, clinics and theatres including GCC and ACH
- share acute (ED) cover
- attend DHO weekly teaching

Te Toka Tumai Auckland Region OMS and HSD House Officer Run Descriptions STONZ- Effective13th January 2025

0	MS HO	Monday	Tuesday	Wednesday	Thursday	Friday
WEEK	Morning	MMH Acutes/ OR/Ward/Clinic	MMH Acutes/ OR/Ward/Clinic	MMH Acutes/ OR/Ward/Clinic	MMH Acutes/ OR/Ward/Clinic	MMH Acutes/ OMS RMO Training optional
A Afternoon		MMH Acutes/ OR/Ward/Clinic	MMH Acutes/ OR/Ward/Clinic	Non-clinical - Education & meetings	MMH Acutes / OR / Ward / Clinic	MMH Acutes/ OR/Ward/Clinic
WEEK	Morning	MMH Acutes/ OR/Ward/Clinic	MMH Acutes/ OR/Ward/Clinic	MMH Acutes/ OR/Ward/Clinic	MMH Acutes/ OR/Ward/Clinic	MMH Acutes/ OR/Ward/Clinic
В	Afternoon	MMH Acutes/ OR/Ward/Clinic	MMH Acutes/ OR/Ward/Clinic	Non-clinical - Education & meeting	MMH Acutes/ OR/Ward/Clinic	MMH Acutes/ OR/Ward/Clinic
WEEK	Morning	MMH Acutes/ OR/Ward/Clinic	MMH Acutes/ OR/Ward/Clinic	MMH Acutes/ OR/Ward/Clinic	MMH Acutes/ OR/Ward/Clinic	MMH Acutes/ OR/Ward/Clinic
С	Afternoon	MMH Acutes/ OR/Ward/Clinic	MMH Acutes/ OR/Ward/Clinic	Non-clinical - Education & meetings	MMH Acutes/ OR/Ward/Clinic	MMH Acutes/ OMS RMO training optional
WEEK	Morning	MMH Acutes/ OR/Ward/Clinic	MMH Acutes/ OR/Ward/Clinic	MMH Acutes/ OR/Ward/Clinic	MMH Acutes/ OR/Ward/Clinic	MMH Acutes/ OR/Ward/Clinic
D	Afternoon	MMH Acutes/ OR/Ward/Clinic	MMH Acutes/ OR/Ward/Clinic	Non-clinical - Education & meetings	MMH Acutes/ OR/Ward/Clinic	MMH Acutes/ OR/Ward/Clinic

Section 3: OMS Training and Education

Area	House Officer Responsibility	Service Responsibility
General	 Through example and supervision, actively contribute to the education of healthcare professionals regarding principles, knowledge and clinical skills relevant to the practice of dentistry. May be requested to teach other health care workers. 	 OMS service specific teaching (10 hours) early in the attachment HSD continuing professional development programme equating to a minimum of 2 hours education per week (1st year DHOs) OMS continuing professional development programme equating to a minimum of 2 hours education per fortnight (2nd Year DHOs)
	 Work toward publishing research project findings, case reports or service related material. 	

Section 4: OMS Cover:

Other Resident and Specialist Cover

There are 7 RMOs who will participate in the on-call roster. The 2 OMS NTR Registrars will work alongside the 5 OMS HOs, providing after-hours on-call coverage from 1700 to 0800 on weekdays, and from 0700 to 1700 or 1700 to 0800 on Saturdays and Sundays. On public holidays, the on-call coverage is from 0800 to 0800 the following day. At any given time, one of the seven DHO positions will serve as the night rotator that rotates through the roster each week.

The 5 OMS HO positions will rotate with the 3 HSD HOs to ensure everyone contributes to the after-hours on-call roster.

Section 5: OMS Performance appraisal

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

Appendix 2 – Hospital & Specialist Dentistry (HSD) Section 1: HSD

House Officer's Responsibilities

Area	Responsibilities
Clinical	• To provide dental treatment and support for HSD patients under the direction and guidance of senior dentists and Consultants, including:
	 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).
	 Provide care to patients presenting for relief of pain only clinics.
	 Review and provide care for inpatients (as rostered).
	 Obtain informed consent for all procedures.
	 Assess patients assigned by the admitting senior dentist or consultant and undertake pre-admission processes and dental assessment for acute and elective patients.
	 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)
	 Ensure detailed patient care treatment plans are in place to support the timely care of patients.
	 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).
	 Ensure effective patient handover and transfer of care.
	 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.
	 Attend operating rooms (as rostered) to assist with the delivery of care.
	 Carry out ward rounds (as rostered) and complete clinical records and follow up appointments as required.
	• 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.
	• 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 Te Toka Tumai patient information forms and platforms including <i>Titanium</i> and the <i>Regional</i> <i>Clinical Portal</i> .
	Maintain patient privacy and confidentiality in accordance with Te Toka Tumai procedures and policy.
	• Ensure clinical practice is maintained within the prescribed New Zealand Dental Council Scope(s) of practice for which she/he is registered. Comply with organisational policies and procedures and the Dental Council of New Zealand (DCNZ) Practice Standards.
	• To keep senior dentists and Consultants informed of all changes in treatment of their

	allocated patients, especially if there is an unexpected event.
	• To participate in clinical audit and assist in the direction and management of patient services.
Quality and	To undertake other duties at the discretion of the senior dentists and Consultants.
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.
	• 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.
	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
	• 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 Te Toka Tumai mandatory training.
	Model behaviours that demonstrate Te Toka Tumai 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.
	• Identify, mitigate and promptly report failures or risks to patients including in relation to infection prevention and control.
	• Understand and apply the Te Toka Tumai 'Code' system for managing incidents and in particular the management of a medical emergency.
	• Ensure incidents are managed and reported in accordance with Te Toka Tumai policies and procedures

Section 2: HSD Weekly Schedules (Indicative)

Dental House Officers rotate through HSD and OMS runs (after a 2 week orientation period) in five 8 week cycles followed by one 10 week cycle which includes the Christmas / New Year 2 week off-roster period. Duties may involve working across multiple sites including but not limited to Te Toka Tumai Auckland, Counties Manukau and Waitemata Districts facilities including provider facilities that may be under contract. Outpatient clinics involve working independently. Time will be allocated to assist with clinical administration at the discretion of the Service; this will reflect the level of clinical activity undertaken. There maybe opportunities provided for DHOs to attend theatre periodically during each run.

HSD A	Monday	Tuesday	Wednesday	Thursday	Friday
Morning	5	Clinical support / OR / Outpatient clinic / Ward round	Clinical support / OR / Outpatient clinic / Ward round	Clinical support / OR / Outpatient clinic / Ward round	Clinical support / OR / Outpatient clinic / Ward round
Afternoon	Clinical support / OR / Outpatient clinic / Ward round	Clinical support / OR / Outpatient clinic / Ward round	Non clinical, Educaiton & Admin	Clinical support / OR / Outpatient clinic / Ward round	Clinical support / OR / Outpatient clinic / Ward round

HSD B	Monday	Tuesday	Wednesday	Thursday	Friday
Morning	Outpatient clinic	Outpatient clinic	CS / Outpatient clinic (Alternate Weeks)	Outpatient clinic / Assist in theatre (1:4) / Non Clinical education (1:4)	H&N MDM
Afternoon	Outpatient clinic	Ward round	Non-clinical - Education & Admin / Assist in theatre (1:4)	Clinical session / Outpatient Clinic (1:4)	Clinical support/OR/ outpatient clinicWard round as required

HSD C	Monday	Tuesday	Wednesday	Thursday	Friday
Morning	Clinical support / OR / Outpatient clinic / Ward round	Clinical support / OR / Outpatient clinic / Ward round	Clinical support / OR / Outpatient clinic / Ward round	Clinical support / OR / Outpatient clinic / Ward round	Clinical support / OR / Outpatient clinic / Ward round
Afternoon	Clinical support / Ward Round OR / Outpatient clinic / Ward round		Non-clinical - Education & Admin*	Ward Round	Clinical support / OR / Outpatient clinic / Ward round

Section 3	B: HSD	Training and	Education
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Area	House Officer Responsibility	Service Responsibility
General	 Through example and supervision, actively contribute to the education of healthcare professionals regarding principles, knowledge and clinical skills relevant to the practice of dentistry. May be requested to teach other health care workers. Presentations and case studies to professional and interest groups when appropriate Actively participate in education sessions within HSD including the delivery of presentations as directed. Present to local dentists at the Auckland Dental Association meetings when appropriate Present at the annual New Zealand Society of Hospital & Community Dentistry conference when appropriate For new graduates registration and participation in an appropriate mentoring programme, such as the New Zealand Dental Association Graduate Professional Development Programme Work toward publishing research project findings, case reports or service-related material 	 HSD service specific teaching (10 hours) early in the attachment HSD continuing professional development programme equating to a minimum of 2 hours education per week

Section 4: HSD Cover:

Other Resident and Specialist Cover				
•	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 Dental House officers working on the roster will vary according to Service runs.			
lf you 5pm	u feel unable to come to work because of illness, please phone the team leader during the day (between 7am –) or			

Section 5: Performance appraisal

DHO	Service
The DHO performance will be supervised and appraised reg on a rotational basis. This may include (but is not limited to (formative) feedback on an on-going basis and periodic for	
 The House Officer will: 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; After any assessment that identifies deficiencies, implement a development plan of action in consultation with the senior dentist/Consultant. 	 The service will provide, An initial meeting between the senior dentist/Consultant and DHO to discuss goals and expectations for the run, review and assessment times, and one-on-one coaching time; An interim assessment report on the DHO six (6) weeks into the run, after discussion between the House Officer and the senior dentist/Consultant responsible for them; The opportunity to discuss any development requirements identified during the attachment. The senior dentist / Consultant responsible for the DHO will bring these to the DHOs attention, and discuss and implement a plan of action to address them; A final assessment report on the DHO at the end of the run, a copy of which is to be sighted and signed by the DHO.