

## Run Description

<b>POSITION:</b>	House Officer
<b>DEPARTMENT:</b>	Hospital in the Home and Community Health Services
<b>PLACE OF WORK:</b>	Health NZ Te Whatu Ora - Counties Manukau District Health Board including Middlemore Hospital and other related sites
<b>RESPONSIBLE TO:</b>	Service Manager and Clinical Director through their supervising Consultant(s) and Clinical Head
<b>FUNCTIONAL RELATIONSHIPS:</b>	Community/Hospital in the Home Nurse Specialists and Nurse Practitioners Health Care Consumers
<b>EMPLOYMENT RELATIONSHIPS:</b>	Employed by Counties Manukau District Health Board
<b>PRIMARY OBJECTIVE:</b>	To facilitate the safe and effective management of patients in the community under the care of Hospital in the Home and Complex Case
<b>RUN RECOGNITION:</b>	The clinical attachment will provide experience in care in a non-hospital setting and will assist with meeting MCNZ requirements for a community experience.  This run is accredited by the MCNZ as a Community Based Attachment (CBA)
<b>RUN PERIOD:</b>	3 Months

## Section 1: House Officer's Responsibilities

Area	Responsibilities
<p><b>Clinical Duties</b></p>	<ol style="list-style-type: none"> <li>1) Community Assessment of patients under Hospital in the Home and Complex Case. This includes home visits and assessment in clinic.</li> <li>2) To provide clinical support to Hospital in the Home/Complex Case Clinical Nurse Specialists.</li> <li>3) To attend and provide clinical support to Community Multi-Disciplinary Team Meetings which is attended by Allied Health, Pharmacy, Nurse Specialists and Practitioners. This will occur under the supervision of a Senior Medical Officer.</li> <li>4) To attend and provide clinical support to the Hospital in the Home Team Meetings under the supervision of Senior Medical Officer</li> <li>5) Over the weekend the House Officer will be paired with an SMO and is expected to provide clinical support to Nurse Specialist as well as attend the Community Multi-Disciplinary Team Meeting.</li> <li>6) To maintain a high standard of communication with patients, patients' whanau and staff.</li> </ol> <p>Health NZ, Te Whatu Ora Clinical Board policies are to be followed at all times.</p>

<p><b>Administration</b></p>	<ul style="list-style-type: none"> <li>• The House Officer is expected to attend (when not clashing with education/other clinical activities) the daily Hospital in the Home meetings and assist in actioning relevant plans for patients.</li> <li>• The House Officer is expected to attend the three weekly Community Multi-Disciplinary Meetings and assist in actioning relevant plans for patients.</li> <li>• The House Officer is responsible for appropriate electronic documentation after community visits/patient assessment.</li> <li>• The House Officer will assist in the ordering of investigations and referral to appropriate sub-specialty services when required.</li> <li>• The House Officer will assist in requesting of medication scripts when required.</li> <li>• The House Officer will assist in completion of Electronic Discharge Summaries (EDS), including assisting Clinical Nurse Specialists in EDS completion.</li> <li>• The House Officer will liaise with GP after patient's discharge from hospital when complexity of diagnosis and management, or results of investigations available after discharge, makes this necessary.</li> <li>• The House Officer together with the responsible clinical nurse specialists and supervising Senior Medical Officer is responsible for the accuracy of the principal and secondary diagnoses and treatment/management and procedures performed recorded on the EDS for complex patients.</li> <li>• All instructions (including drugs, IV fluids and instructions for nursing) will be accurately recorded and signed.</li> <li>• The House Officer will assist in the completion of death certificates for patients who have been under their care.</li> <li>• The results of all investigations will be sighted and signed electronically. The responsibility for results relating to inpatients may be shared within team including nurse practitioners and senior medical officers. The House Officer will refer results to the Consultant where there is uncertainty about the significance of the result.</li> <li>• The House Officer under the supervision of the SMO will be able adjust parameters for the BioBeat Remote Monitoring Device on the DATOS platform</li> <li>• Learn to obtain informed consent for procedures within the framework of the Medical Council guidelines, by observing consultants or experienced Registrars, which state:  <p>“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.”</p> <p>“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.”</p> </li> <li>• If absent due to unexpected circumstances (e.g. health, other), contact the RMO Support Unit or, if after hours the Duty Manager directly or the Consultant to which the house officer is clinically responsible in the absent duty</li> <li>• As an RMO working at CMDHB you will be provided with a Concerto login and CMDHB email account which will be used for all work-related communication. It is your responsibility to ensure you check this regularly</li> </ul>
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## Section 2: Training and Education

The scheduled weekday activities are shown below. The dates and times of these sessions may be subject to change.

Other teaching is available depending on the sub-speciality of interest. Please refer to Paanui for days and times.

	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>
<b>a.m.</b>	Community Visits Nursing Support	Community Visits Nursing Support  Community MDT (1 in 3 weeks)	Community Visits Nursing Support	Community Visits Nursing Support	Community Visits Nursing Support
<b>p.m.</b>	Administration Time/ Hospital in the Home Meeting	Hospital in the Home Meeting  PM Teaching (shared with Nurse Practitioners)	House Officer Teaching / Administration Time	12.15 – Medical Grand Round  Hospital in the Home Meeting	Administration Time / Hospital in the Home Meeting

### ***Education***

The House Officer is expected to attend HITH teaching sessions (done together with Nurse Practitioners). The House Officer is expected to attend dedicated house officer teacher offered by Counties Manukau Health NZ Te Whatu Ora as well as Medical Grand Round.

### ***Research***

A clinical research project may be undertaken during the attachment subject to approval by the Manager, Intermediary Care Services and the Clinical Head.

## Section 3: Roster

The normal hours of work are from 0800 to 1630, Monday to Friday.

The published roster may include up to 3 x weekends (Saturday 0800 to 1600 + Sunday 0800 to 1600)

## Section 4: Cover and Leave

There is no out of service cover for absence from work for sick leave, planned annual leave, conference leave or study leave. Leave cover is arranged on a "first come first served" basis and applications for leave should be submitted as early as possible to provide the consultant and the service reasonable notice to ensure internal coverage will be available.

Sick absence and all leave is covered within the Department.

MECA provisions about employee consent to cross cover apply.

## Section 6: Performance appraisal

<i>House Officer</i>	<i>Service</i>
<p>The House Officer will:</p> <ul style="list-style-type: none"> <li>• At the outset of the run meet with their designated Consultant to discuss their goals, learning objectives and expectations for the run, review and assessment times, and one on one teaching time</li> <li>• Ensure a mid-run assessment is completed after discussion between the House Officer and the Consultant responsible for them</li> <li>• After any assessment that identifies deficiencies, implement a corrective plan of action in consultation with their Consultant.</li> <li>• Sight and sign the final assessment report provided by the service.</li> </ul>	<p>The service will provide:</p> <ul style="list-style-type: none"> <li>• An initial meeting between the Consultant and House Officer to discuss learning objectives and expectations for the run, review and assessment times, and one on one teaching time</li> <li>• 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</li> <li>• 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</li> <li>• 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</li> </ul>

## Section 7: Hours and Salary Category

Average Working Hours		Service Commitments
Basic hours (Mon-Fri)	40.00	The Service will be responsible for the preparation of any rosters.
Rostered additional hours (inc. nights, weekends & long days)	3.70	
All other un-rostered hours	TBC	
Total hours	43.70	

**Salary:** The salary for this run will be an F run category.