

RUN DESCRIPTION

POSITION:	House Officer
DEPARTMENT:	Southpoint Family Doctors
PLACE OF WORK:	Southpoint Family Doctors, 4/9 Sharkey Street, Manukau City
RESPONSIBLE TO:	<ul style="list-style-type: none"> Clinical Director / Operations Manager Southpoint Family Doctors
FUNCTIONAL RELATIONSHIPS:	Healthcare consumers, multidisciplinary healthcare team hospital and community based healthcare workers including non clinical staff. Professional relationships with the clinical supervisor/s, other specialists and medical staff. Maintenance of usual training relationships eg with Prevocational educational supervisor, DCT.
EMPLOYMENT RELATIONSHIPS:	Employed by Waitemata District on secondment to Southpoint Family Doctors for the duration of the clinical attachment.
PRIMARY OBJECTIVE:	<ul style="list-style-type: none"> Involvement in the medical management of patients in a GP practice and the wider healthcare network, in a supportive and stimulating learning environment.
RUN RECOGNITION:	<p>The clinical attachment is offered by t Southpoint Family Doctors. It is an opportunity to gain experience in a unique community healthcare environment with access to District support who will assist with meeting MCNZ requirement for RMO community experience.</p> <p>This is a MCNZ accredited Community Based Attachment (CBA).</p>
RUN PERIOD:	13 Weeks

Background:

The House Officer will be primarily based at Southpoint Family Doctors, 4/9 Sharkey Street, Manukau. Below we have provided a break down of the work you will be carrying during the clinical attachment.

This clinical attachment is designed to allow House Officers to gain appropriate exposure to working in a unique, underserved community outside a hospital setting; the latter has the benefit of providing near-peer and senior support within existing training frameworks. House Officers will experience community management of illness and wellness in a community setting.

The GP practice will provide a diverse range of exposure from all aspects of a person well-being of different ethnicities; ages and gender. The practice is located nearby and serves a diverse population with a Pacifica predominance. The attachment will allow House Officers to gain improved understanding of difficult to reach patients, trauma-informed care and the importance of the integration between care providers to improve patient journeys. This attachment offers House Officers first hand experience of acknowledged health disparities and the opportunity to consider a career that contributes to improving health and health-literacy for patients with reduced access to healthcare.

The training will provide a good foundation toward community vocational pathways whilst offering a different perspective on certain specialities including paediatrics, obstetrics, gynaecology and oral health within an environment where RMOs may acquire relevant new skills and basic competencies in acute and community care.

The House Officer will be part of a multidisciplinary team including General Practitioners, Nurses, Health Care Assistants, Dentists, Midwife, Physiotherapist.. The MDT work together to ensure that patients receive comprehensive care appropriate to the patients need(s). These needs may include elements within physical (tinana), psychological (hinengaro), social (whānau) or spiritual (wairua) domains.

Southpoint Family Doctors

Southpoint Family Doctors provides care and services for a relatively high deprivation population with a diverse cultural and ethnic background in 26% Pacifica, 20% Māori and 29% Q5 Quintiles. Southpoint Family Doctors will provide clinical knowledge and skills within a community setting and the opportunity to see holistic care with a large multi-disciplinary team, using innovative methodologies and technology to provide and advance care. Importantly the Southpoint Family Doctors hospital setting will provide the House Officer with access to near peer networks, collegial support and professionally more familiar structures as the Corrections environment may be professionally and personally challenging.

The key integrated practice concepts applied during the training are:

- Patient-centred care
- Providing healthcare to patients with reduced access
- Working in a multidisciplinary environment across traditional boundaries
- Learning about healthcare boundaries: primary-secondary, within departments, across service providers

Section 1: Clinical Attachment

- Training will occur at Southpoint Family Doctors.
- House Officer learning is supervised to ensure it is objectives driven, targeted to House Officer learning needs and includes an understanding of safe conduct in a community environment.
- Workplace safety issues are the responsibility of the providers and House Officers will conform to all practice safety standards, according to onsite induction.

Performance Measures

Objectives of the training programme

Objective:	Achieved by:
To experience Southpoint Family Doctors and its interface with community and in-hospital departments	Training objectives
To promote careers in community health as a viable and rewarding career option	Quality of the experience Mentoring and clinician feedback/discussion
To take advantage of the unique community setting to appreciate patient context	Supervisor and clinician feedback/discussion
To continue to acquire medical knowledge and expertise	Training Objectives
To develop a sense of responsibility to patients, staff, and community	Peer review
To develop appropriate interpersonal and communication skills	Customised input to meet specific need for individuals
To gain an understanding of relevant cultures including Māori, Pacific, Adian and Pakeha.	Cultural Competencies in Health courses available through the Waitemata District
To develop collegial and peer associations and linkages	Included in orientation to this programme Mentoring and support

Learning Environment

The clinical experience will be facilitated in a planned and managed learning environment, and through interactions between the House Officer and patients, and interactions with other health professionals. The House Officer will receive support and guidance from their clinical supervisors to ensure that they are meeting their learning goals, and that a representative experience of both settings is gained. The run will provide the opportunity to observe and participate in the interactions between community, acute and hospital services, as well as other with other services within the GP community eg health navigators, midwives, allied health, district nursing and will create a positive learning opportunity within the community.

Training is on an apprenticeship basis, and much learning is by example. The examples set by the Southpoint Family Doctors staff will strongly influence the quality of the learning experience. This requires both good role modelling and constructive feedback from the supervisors and active participation by the House Officer.

The learning opportunities will include:

- Personal management skills
- Serving a multi-cultural community
- Understanding in-reach by external services to a community to improve healthcare provision inc hospital based services
- Innovative community care
- Doctors contributing to and planning for staff development

Attendance at PGY2 protected teaching workshop days will be rostered by arrangement with RMO Support and the Medical Education & Training Unit (maximum 3 days in the 3 month attachment).

Specific Training Requirements and Expected Outcomes

House Officers will gain meaningful experience of GP family medicine and be more aware of the community- multidisciplinary-hospital organisational and individual interfaces.

It is anticipated this position will be recognised as rewarding and provide RMOs with the opportunity to serve patients with reduced access to healthcare.

House Officers will have contributed to the work of the service during their placement. House Officers will provide feedback on their experience to their employing hospital on completion of the placement.

It is expected that the House Officer will experience the following clinical presentations during the course of the attachment:

- Primary Health conditions
- Obstetrics: early pregnancy through to post-natal care
- Drug addiction
- Mental health (acute and chronic)
- Musculoskeletal (acute and chronic)
- Chronic Health Conditions inc diabetes

Clinical Supervision

At PGY 2 level House Officers require a high degree of supervision and support. This is to ensure that the House Officer is exposed to a training environment that enables successful completion of their desirable skills list throughout the run. In this model support/feedback and mentoring is offered to the trainee. The supervisors will accept responsibility for direct supervision on a day-to-day basis for the learning needs and the provision of clinical care during the attachment.

Day to day clinical supervision will be location dependent. When on site at Southpoint Family Doctors the clinical supervision will be provided by the Clinical Director.

Formal clinical supervision will be provided by a nominated Southpoint Family Doctors vocationally registered GP. The House Officer will work directly with these clinical supervisors on Southpoint Family Doctors who will have responsibility for the House Officer's patients.

Ara Poutama and Southpoint Family Doctors will create a suitable learning environment utilising a MDT approach and will:

- Create and maintain a suitable individual learning environment for the House Officer.
- Act as a mentor for the House Officer.
- Make sure that a wide range of opportunities for clinical knowledge and skill development is available to the House Officer.
- Ensure that the House Officer has a level of supervision appropriate to their skill level.
- Provide guidance to the House Officer on the development of clinical strategies, knowledge, and skills objectives.
- Provide guidance and advice to House Officers regarding the cultural appropriateness of care provided.
- Will not have more than one House Officer under their supervision.
- Provide a report to the District which employs the House Officer via the NRA at the end of the placement, and liaise with the nominated Southpoint Family Doctors GP to provide feedback
- Be available (or delegate to appropriate replacement) to meet with the House Officer to go through the management plans instituted by the House Officer for patients seen that day
- Arrange for alternative supervisor to cover any periods of absence or work/shifts which are not together

Southpoint Family Doctors will:

- Be responsible for holding and recording meetings on ePort; namely the start of attachment meeting, the mid attachment meeting and end of attachment assessment. Liaison with other day to day clinical supervisors for feedback to inform ePort recordings, and liaison with the Waitemata Prevocational supervisor and/or Director of Clinical Training if and as needed. Instruction for Supervisors in the use of ePort will be provided by the Director of Clinical training where required.

Section 2: House Officer Responsibilities

Area	Responsibility
Clinical Duties and Work Schedule	<p>Southpoint Family Doctors:</p> <ul style="list-style-type: none"> • Responsible for the clinical assessment, investigation, diagnosis and treatment of patients under the supervision of the GPs • To attend handover on all relevant rostered days • Under the supervision of the GP or their delegate: • To be responsible for the assessment and management of patients attending for care (whether in person, on line or at home) line with the service time frames • To maintain an accurate and legible clinical record for each patient, including: <ul style="list-style-type: none"> - ○ History, examination, diagnosis, problem list and plan ○ Update clinical records as often as indicated by the patient's condition. ○ All entries recorded with the time and date, signature, name + contact details. • To facilitate safe and efficient management of patients in the care of the GP service. This includes: <ul style="list-style-type: none"> ○ maintaining timely reviews of patients, particularly post diagnostic tests ○ documentation of comprehensive management plans ○ communication with relevant family, whanau and colleagues ○ liaison with other services as required inc. referral • To keep the supervising GP informed about problems as they arise especially when /if the patient is seriously ill or causing significant concern • To participate in flop from EDS and A & E Consultation. • To co-ordinate patients care through liaison with other services in a timely manner • To provide supervision of any medical students or observers attached to Southpoint Family Doctors. • To reasonably participate in research projects and clinical audit within the services • Any other duties that may be required in the interests of the service such as organising clinics and lunchtime presentations. • House Officers may be requested to present case summaries and topic reviews.
Administration	<p>Southpoint Family Doctors:</p> <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 • If absent due to unexpected circumstances (e.g. health, other), contact the Duty Manager directly.

Section 3: Training and Education

Nature	Details
Protected training time	<p>Southpoint Family Doctors: Practice meetings and reviews, case discussions to be attended as per timetable PGY2 scheduled training days as above</p>
<p>The House officer is expected to learn together with nursing, technical staff and other medical staff when requested.</p>	

Section 4: Roster

<i>Hours of Work</i>
<p>Southpoint Family Doctors Monday - Friday– 0830-1700 Please note – while rostered to Southpoint Family Doctors the House Officer will have a 30 minute un-paid meal break</p> <p>During the ordinary hours the house officer will be allocated to clinical activities and non-clinical activities. Timetabling of session with the supervisor, clinical activities, non-clinical activities and protected training time may be subject to change.</p> <p>Clinical activities may include patient admissions, patient care and administration related to patient care, multidisciplinary meetings, audit and quality assurance activities. Case conferences and reviews, telephone and other ad hoc consultations, preparation of clinical reports are also within the remit of clinical work.</p> <p>Non-clinical activities may include theoretical learning sessions, teaching (including preparation time and preparation of educational resources), networking with colleagues, and supervision sessions. In addition practice administration, general reading or research, planning meetings, preparation of clinical resources and time spent visiting other community services for the broader understanding of the primary health care environment are considered as non-clinical work.</p>

Section 5: Cover:

<i>Cover</i>
<p>Southpoint Family Doctors – The House Officer for this run is ‘supernumerary’. Therefore cover is not required for any leave.</p>

Section 6: Performance appraisal

<i>House Officer</i>	<i>Community Provider</i>
<p>The House Officer will:</p> <p>At the outset of the run meet with their designated Clinical Supervisor to discuss their learning objectives and expectations for the run review and assessment times, and one-on-one teaching time</p> <p>After any assessment that identifies deficiencies, implement a corrective plan of action in consultation with their Clinical Supervisor.</p>	<p>The Providers will ensure:</p> <p>An initial meeting between the Clinical Supervisor and House Officer to discuss learning objectives and expectations for the run, review and assessment time, and one on one teaching time. This meeting will be recorded on ePort</p> <p>A mid-run meeting and assessment report on the House Officer approx. six to seven (6-7) weeks into the run, after discussion between the House Officer and the Clinical Supervisor responsible for them. This meeting will be recorded on ePort</p> <p>The opportunity to discuss any deficiencies identified during the attachment. The Clinical Supervisor 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</p> <p>An end of run meeting and final assessment report on the House Officer, a copy of which is to be electronically sighted and signed by the House Officer. The final assessment will be recorded on ePort under the designated domains as well as in the free text sections.</p> <p>For PGY 1 and PGY 2 end of run meetings and assessments will be documented electronically via ePort.</p> <p>The Clinical supervisor will seek feedback from both locations of this attachment.</p> <p>The Clinical supervisor will liaise with others as need in the case of identified difficulties to ensure training support is provided including Director of Clinical Training and Prevocational Educational Supervisor</p>

Section 7: Leave

<i>House officer</i>	<i>Community Provider and Waitemata DHB</i>
<p>The House officer will apply for leave as soon as possible via email to the RMO unit who will coordinate with Southpoint Family Doctors services regarding leave requests. Where possible as much notice of leave is required.</p> <p>Maintenance of usual training relationships eg with Prevocational educational supervisor, DCT.</p>	<p>The Providers will ensure timely response to leave requests</p>

Section 8: Hours and Salary Category

<i>Average Working Hours</i>		<i>Service Commitments</i>
Ordinary Hours	40.00	The service, together with RMO Support will be responsible for the preparation of any rosters
Rostered Additional Hours	0.00	
Unrostered Hours	0.00	
Run Reivew completed January 2024		
Total Hours per week	40.00	

Salary: The salary for this attachment is detailed to be a Category F