



West Coast District Health Board

Te Poari Hauora a Rohe o Tai Poutini

Updated April 2010

RUN DESCRIPTION

RESIDENT MEDICAL OFFICER Emergency Medicine GREY HOSPITAL

1 PERIOD COVERED

The Resident Medical Officer (RMO) will be employed at Grey Hospital and in related clinics. The run period is three months.

2 REGISTRATION

The RMO position is suitable for registration with the New Zealand Medical Council. The runs are categorised by the NZMC as:

- | | |
|----------------------------------|------------|
| • General Medicine/Paediatrics | Category A |
| • General Surgery / Orthopaedics | Category A |
| • O&G / Orthopaedics | Category B |
| • Relief Runs | Category C |

3 CLINICAL RESPONSIBILITIES AND WORK SCHEDULES

The RMO will:

- Participate in the management of patients in accordance with the standards set down by the West Coast District Health Board.
- Assume responsibility for acute admissions until the relevant consultant has been informed.
- Attend to acute and elective admissions to the run assigned to, performing assessment and carrying out formal admission procedure as appropriate.
- Participate in ward rounds conducted by consultants.
- Maintain comprehensive and legible records for all patients in whose care he/she is involved.
- Ensure that appropriate laboratory tests are requested and results are seen and acted upon.
- Complete discharge to ensure that patients receive continuing care from other health professionals as appropriate.
- Ensure that on discharge patients receive:
 - clinical summary
 - follow up appointment
 - prescription
 - Instruction relevant to their medications and/or ongoing care.

- Complete the death certificate in a timely manner following the death of a patient.
- Carry out invasive procedures only on authority from and under instruction from the consultant.
- Ensure continuity of patient care by formally handing over to the RMO on duty at the end of each day.
- When on duty respond to all calls in a timely manner.
- Attend educational sessions provided, without compromising patient care.
- Understand and comply with all relevant legislation.
- Attend to inpatients during rostered duties out of hours.
- Attend to A&E Department during rostered duties out of hours. From time-to-time cover for A&E during week days may be required.
- Maintain open communication with GPs and accept all admissions, pending discussion with the relevant consultant on duty.
- Maintain effective communication with patients relatives/significant others.
- Utilise all hospital resources with the aim of achieving the right balance between patient care and service costs.

4 RESPONSIBILITY FOR PERFORMANCE

The RMO is directly responsible for his/her performance to the consultant(s) for whom he/she is working. In the case of after-hours duties, a consultant from each specialty will be on call and the RMO will be responsible to that person. If for any reason cover is not available, instructions are left for communication with Christchurch Hospital consultants.

Liaison Paediatrician:	Dr John Garret and the Visiting Consultants (1:3 weekend, OPD clinics and theatre provided by Visiting Consultants) 2 x Physicians and Tertiary DHB provide paediatric support on a daily basis	
Obstets / Gynaecologists:	Dr Vicki Robertson Dr Denis Benichou Locum	Head of Department
General Medicine:	Dr Upananda Bopitiya Dr Paul Holt Dr Lasantha Martinus	
General Surgery:	Mr Terry Mixter Mr Jonathan Pace Mr Phil Shouler (0.5 FTE) Locum (0.5 FTE)	Head of Department
Orthopaedics:	Mr Pradu Dayaram Mark Bloomfield Peter Hucker (Locum)	Senior Surgeon

5 PROVISION FOR TRAINING AND EDUCATION

Orientation of the Service will be provided to all new house officers at the commencement of each run.

Training and education sessions are scheduled as follows:

Monday	Trauma Management / Orthopaedics
Tuesday	General Medicine
Wednesday	Journal Club
Thursday	Mental Health/General Practice
Friday AM	Radiology
Friday PM	Presentation by/for Senior Medical Staff

In addition, sessions are held on a more ad hoc basis in the areas of general surgery, paediatrics and psychiatry. RMOs are advised of these by the consultant concerned.

6 TRAINING AND DEVELOPMENT OF OTHER STAFF

The RMO will be expected to assist in the development of knowledge and skills of other health care employees. From time-to-time medical students may also be in attendance.

7 SUB-SPECIALTY ROSTERS INCLUDED IN THE JOB

The House Office works from the RMO Roster. Rostered shifts over a twenty four-hour period Monday to Friday.

In addition to these hours the RMO will participate in the Grey Hospital roster at a maximum of the following frequencies:

1:7 Roster	Evenings	11 days in 13 weeks
	Weekends	2 or 3 weekends
	Nights	2 or 3 sets of nights (7 days)

If a 1:7 roster is unable to be worked, an appropriate roster is drawn up with agreement of the RMOs concerned, and all penalties required under the employment contract are paid.

8 OTHER RESIDENT AND SPECIALIST COVER

Medical staffing at Grey Hospital is as follows:

Area	Consultants	RMOs
Medicine/Paediatrics	3 FTE	2 FTE
Psychiatry	3 FTE	
General Surgery/Orthopaedics	3 FTE General 2 FTE Orthopaedic	2 FTE
Emergency Department:		
1 FTE SMO ED Monday to Sunday 0800- 1600 hours		1 FTE
1 FTE SMO ED covering Monday to Sunday 1400-2200 hours		
(Relevant consultants with Liaison Paediatrician cover paediatrics.)		
Night Relief		1 FTE
General Relief		1 FTE

9 EXPECTED AVERAGE HOURS OF WORK

Ordinary: 40 hours per week

Rostered: 14 hours per week

Non-Rostered: 1.5 hours per week

Total Average Hours Per Week:

55.5 hours (Category C) – Relief runs are Category A.