Senior Medical Officer

Infectious Diseases and General Medicine Position

Description

Date: November 2019

Job Title: Senior Medical officer - Infectious Diseases/Gen Med
Department: Specialty Medicine & Health of Older Adults
Acute and Emergency Medicine
Location: North Shore & Waitakere Hospitals
Reporting To: Clinical Director Infectious Diseases, Operations Manager Infectious Diseases
Direct Reports: Junior Medical Officers (Registrar and House Surgeon)

Functional Relationships with:
- Internal
  Head of Division, Specialty Medicine and Health of Older People
  Clinical Lead, Infection Service
  Head of Division, Acute & Emergency Medicine Services Clinical Director,
  General Medicine
  General Manager, Specialty Medicine and Health of Older People
  Operations Manager, General Medicine and ADU
  Clinical Director, Respiratory Services
  Operations Manager, Respiratory Services
  Women’s Health Team
  SMO’s in Medicine and other services
  Charge Nurse Managers & Nursing staff in wards, ADU, ED, Clinics
  Allied Health Professionals
  Other Health professional contributing to the care of Medical patients
  HR Manager
  RMO Unit
  Medical Education Training Unit
- External
  As required with patients, general practitioners, PHOs, other medical specialists, purchasers, industry representatives, Government agencies, statutory authorities, education / research authorities and other professional bodies

Head of Division & General Manager
Specialty Medicine and Health of Older Adults

Clinical Director
Infection Service

Operations Manager,
Infection Service

Senior Medical Officers
Our Purpose, Values and Standards

At the heart of Waitemata DHB is our promise of ‘best care for everyone’. This promise statement is the articulation of our three-fold purpose to:

1. promote wellness,
2. prevent, cure and ameliorate ill health and
3. relieve the suffering of those entrusted to our care.

At the heart of our values is the need for all of us to reflect on the intrinsic dignity of every single person that enters our care. It is a privilege to be able to care for patients, whānau and our community, a privilege that is sometimes overlooked in our day to day work.

Our standards and behaviours serve as a reminder to us all about how we are with our patients and with each other.
1) Introductory comments:

a) Senior Medical Officer Duties

Duties: The Senior Medical Officer’s duties will be mutually agreed with HOD, Clinical Director and General Manager for Specialty Medicine & Health of Older Adults, with regard to the requirements of the service and the location(s) the clinician works at.

Part-time positions: This job description describes a typical fulltime appointment, for part time appointees some of the described duties may not apply – this will be decided by negotiation with individuals.

Location of employment: As an employee of Waitemata District Health Board the Senior Medical Officer is potentially expected to work anywhere within the Board area i.e. appointments are not made to a specific site.

Employment Contract: This job description is subject to the provisions of the relevant Collective Employment Agreement for Senior Medical Officers.

b) Credentialing: The Senior Medical Officer will either have been credentialed for his/her scope of clinical activities within General Medicine or will undergo credentialing at the time of appointment. The Senior Medical Officer will take part in the credentialing process.

c) Clinical vs. Non-clinical time:

i) Senior Medical Officers are required to engage in a number of activities that are not directly related to the care of specific patients. Examples include maintaining a program of continuing professional development, engagement in clinical audit and research, training and teaching of junior staff, and activities that contribute to service development. Such activities (i.e. those that are not directed towards the care of individual patients) are termed “non-clinical” and an allocation of time in the Senior Medical Officer’s usual weekly schedule will be made to allow for them.

ii) Generally, the activities listed in section “3” and “4” of this document which relate to care of individual patients in the outpatient, ward, domiciliary, ward consultation and out-of-hours call context are “clinical duties” and activities in sections 4 – 6 are “non-clinical” duties.

iii) The balance of clinical versus non-clinical time will be as per the relevant employment agreement, or as discussed and agreed with the clinical director.

d) Provision of Support: The Senior Medical Officer will be provided with the necessary support and resources to achieve the goals specified in this document. Details of the support and resources available, and particularly any proposed changes in support and resources, will be discussed and agreed between Senior Medical Officer and management.

e) Document Review

i) This job description should be reviewed by the Senior Medical Officers of the service along with the Clinical Director and Operations Manager on at least a two-year basis. This can also be done at any
other time at the request of any Senior Medical Officer or management; it is particularly important that this happens if a significant change in employment expectations or job size has occurred or is anticipated.

ii) Changes to job description: Changes in the nature or location of a clinician’s duties will occur by general agreement after discussions between the Senior Medical Officer and the Clinical Director, and General Manager Specialty Medicine & Health of Older Adults.

2) Conduct and Ethics

The Senior Medical Officer will, to the best of his/her ability, undertake his/her clinical responsibilities and conduct himself/herself in matters relating to his/her employment in accordance with relevant professional standards, guidelines and ethics, as determined from time to time by:

- The New Zealand Medical Association;
- The Senior Medical Officer’s medical college(s) and/or professional association(s);
- The New Zealand Medical Council;
- The Health and Disability Commissioner;
- RACP regulations & statutory requirements;
- Waitemata District Health Board Policies & Procedures.

The Senior Medical Officer should maintain a punctual approach to scheduled activities, particularly to patient contacts. If absent from or unable to perform his/her duties the SMO will inform the Clinical Director, and Operations Manager.

The SMO should conduct him/herself in such a way as to provide an example for juniors to follow.

3) Clinical Duties

Home Wards

- Daily ward rounds the primary responsibility will be to review the clinical history and findings, to review the management plan, to ensure that this is being actioned by relevant staff (investigations and treatment), to ensure effective education and communication (with patients, their families, and other health professionals), and to supervise the discharge summaries.

- The physician will be accountable for attendance at the ward rounds, supervision of the activities of the junior medical staff, rational use of resources (within agreed protocols and guidelines where they exist), regular review of the medication chart and problem plan.

- All ward rounds as specified in the job size document and post acute ward rounds during a consultant’s rostered period, are required to ensure a minimum standard of supervision, during which all new patients will be seen and the progress of all patients reviewed.

- Additional ward visits may be required to ensure that acute admissions are seen within 24hrs or as soon as possible.
The activities included and associated with these ward rounds will not necessarily be undertaken consecutively or sequentially. Activities include:

- patient contact time
- data gathering
- meetings with families and caregivers
- checking and reviewing management and problem plans
- checking and reviewing medication charts
- general administration time
- consulting with other specialists
- liaison meetings with nurses and allied health professionals involved in the provision of care
- follow-up activities
- case research
- supervision of discharge summaries
- teaching and supervision of trainees

Successful performance will be measured by meeting relevant key performance indicators and including timely attendance at the ward rounds, patient/family satisfaction, at least 90% of new patients being seen within 24 hours of admission, physician assessment recorded in the notes of each ward round, and effective supervision of house physician and registrar discharge notes.

Ambulatory Outpatient Clinics - Infectious Diseases / General Medicine

In the ambulatory clinic setting the Senior Medical Officer will:

- assess the patient
- Provide a specialist opinion which includes a diagnosis and recommended plan of management and follow up
- communicate with the patient and family, referring health practitioner and the multidisciplinary team
- review, sign and act upon relevant old notes, letters, reports and results
- prepare a formal report to the referring professional clinic scheduling should allow time for the above, and
  for:
    - checking and reviewing results of investigations
    - following up discharged patients to monitor progress
    - consulting with members of the multidisciplinary team and other specialists
    - travelling time (if applicable)

4. Acute General Medicine Roster

It is expected that the Senior Medical Officer will contribute to the Waitemata DHB acute roster. The Senior Medical Officer must comply with Waitemata DHB service standards.

Call-back Activities

The Employee is required to participate in the General Medicine acute and call back roster. Note that the roster involves a mixture of required attendance on-site for weekend "acute sessions", and being available to be called back to work if required.
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- Currently the Senior Medical Officer is required to participate in the call-back roster for General Medicine. The frequency of call for this roster when based at North Shore and Waitakere Hospitals is defined as currently averaging one in five nights over seven days.

When on call, the duty Consultant will be required to remain immediately contactable, and to attend the hospital within 30 minutes of call.

5. Other Professional Duties

- During the following liaison and co-ordination activities, the Senior Medical Officer is primarily responsible for facilitating the successful co-ordination of patient care and associated support activities through effective participation.

- The Senior Medical Officer is accountable for regular and timely attendance at all such scheduled activities, full participation in these, and effective use of the time available.

- Activities included within this section include:
  - morbidity and mortality review meetings
  - X-ray conferences
  - consultants clinical meetings (to review and discuss cases)
  - departmental quality improvement, peer review, and clinical audit programs
  - personal literature review - including active participation in in-house journal
  - review meetings
  - preparation of materials for and provision of formal Registrar teaching
  - liaison meetings
  - management meetings
  - special education service meetings

- The time taken for these activities, after taking into account the paid time available for quality assurance / peer review activities, and CME leave is clearly defined in the individual job size documents.

Education

The department has a major educational role of many health professionals including medical staff, medical students, nurses, nursing students and physiotherapy students. The Senior Medical Officer will be expected to actively participate in educational programmes.

Continuing medical education is considered a priority. The department will assist the Senior Medical Officer to achieve the CME requirements set out by their professional body. It is expected that the Senior Medical Officer will attend department academic meetings, and support the academic programme wherever possible.

Administration

Efficient administration systems are an important component of a quality service. Time will be allocated for administration for activities such as reviewing results, etc as per the ASMS CEA.
Professional Accountabilities

All Senior Medical Officers, in their specialty, are accountable for their professional standards and conduct at all times. Any breach of professional conduct or clinical standards failures must be recorded and reported to the Head of Division Acute & Emergency Medicine Services, General Manager Acute & Emergency Medicine Services. Professional help must be sought as required. Patient confidentiality and security must be maintained at all times.

The Senior Medical Officer must also recognise individual responsibility for Workplace Health and Safety under the Health and Safety in Employment Act 1992. Company health and safety policies should be read and understood and relevant procedures applied to their own work activities.


Maximum Work Periods and Other Work

Wherever possible, the maximum number of hours worked consecutively should not exceed 15 (except in emergencies).

Where the Senior Medical Officer is engaged in work other than for Waitemata DHB on the same day as rostered to work for the company, they will not commit to work more than 15 consecutive hours (except in emergencies).

The Senior Medical Officer may engage in other work (i.e. other than for Waitemata DHB) provided they meet availability and rostered work requirements, and agreement from the Clinical Director and Operations Manager, General Medicine.

Support Services

Staffing levels for support staff will be planned and determined by the Head of Acute & Emergency Medicine Services in consultation with the Director of Hospital Services and Clinical Director, Medicine, and in accordance with standards and safety levels agreed by the Clinical Board.

This is with particular reference to:
- junior medical staff coverage of evenings and weekends, and nights to ensure safe practices
- appropriately skilled nursing staff
- appropriate administrative and secretarial support

Performance Assessment

Each Senior Medical Officer will participate in departmental audit activities, and in the development of departmental and individual performance assessment criteria and tools. These will include both quantitative (where appropriate) and qualitative assessments, and may include a variety of mechanisms including peer review.
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Additional Duties

Where Senior Medical Officers are requested to perform additional sessions over and above the number agreed in this job description: the frequency of this is unclear, it is agreed beforehand that you will submit the claim form to the Operations Manager for authorization.

Supervision of Junior Staff

The supervision of Junior Medical staff is an integral part of the Senior Medical Officers role. This is necessary to:

- monitor the quality of care provided by Junior Staff.
- meet supervision requirements of the employer, Medical Council and specialist colleges.
- facilitate the continuing education and professional development of Junior Staff.

Supervision entails regular face to face contact and communication with junior staff, discussion of clinical issues, joint review of patients, and review of documentation including clinical notes, medication charts, problem plans and discharge letters. Supervision should be to a standard that satisfies the requirements and recommendations as laid down by the New Zealand Medical Council, Vocational training Health Workforce New Zealand.

Each Registrar and House Officer (“RMO”) working in the Service will have a Senior Medical Officer assigned as primary supervisor. This SMO is responsible for assessing the performance and reviewing the workload of the RMO over his/her attachment to General Medicine. Feedback discussions between the Senior Medical Officer and the RMO will occur regularly. A final report will be prepared at the end of the attachment.

The Senior Medical Officer should be readily accessible to RMOs for discussion of ward cases and cases assessed by them within the Emergency Department/ADU’s and other wards in Waitemata District Health Board. They should be available to supervise RMO’s in the outpatient setting as follows:

Supervision of General Medicine Registrar Clinic

- Provide oversight & supervision of the team medical registrar clinic including:
  - Review of patients pre & post clinic
  - Review of clinic letters
  - Be available for medical registrar to contact during clinic for advise and if unable to have identified alternative contact to provide this support

The Senior Medical Officer needs to ensure that delegated work is clearly communicated and that the RMO understands what they are expected to do. The delegation of tasks to RMOs must be only done after careful consideration of the knowledge, skill and experience of the junior performing the delegated activity.

The Senior Medical Officer should monitor the skills of the RMO in managing the day to day tasks of the general Medical wards, his/her supervision of house officers (in the case of Registrars), and his/her ability to work within the multi-disciplinary team.

The Senior Medical Officer should encourage and assist the junior medical staff to present cases in the ward settings, in-service training, medical rounds and quality forums, and to participate in quality of service activities.
Medical Student Teaching

Waitemata District Health Board is contracted to provide teaching for fourth, fifth & sixth year medical students. Senior Medical Officers will contribute to the program for students assigned to their wards.

Quality and Workplace Health & Safety

It is expected that the Senior Medical Officer will:

- Deliver care in a sensitive and appropriate fashion, taking into account cultural differences and patient rights. This includes ensuring that informed consent is obtained where required in accordance with Waitemata District Health Board policy.
- Deliver care in accordance with the Code of Health and Disability Services Consumer Rights’ 1996, and the organisation’s values. (See also Section 2).
- Allocate and utilise finite health care resources in line with service goals and strategy.
- Participate in quality improvement activities for the service, and audits within the service as agreed with the Clinical Director.
- Participate in data collection for the purposes of maintaining unit statistics and quality improvement.
- Participate in the management of referrals as required and ensure patients are considered for entry to the service in an equitable and timely manner.
- Manage waiting lists effectively in accordance with clinical priorities of the patients and acceptable waiting times.

Statutory & Treaty of Waitangi obligations

- Ensures the professional and political integrity of WDHB by carrying out all functions in compliance of the Treaty of Waitangi and by demonstrating a serious commitment to keeping the Treaty alive.
- Shows sensitivity to cultural complexity in the workforce and patient population.

To recognise individual responsibility for workplace Health & Safety under the Health and Safety at Work Act 2015

- Following & complying with H&S policies & processes & applying them to their own work activities, including using/wearing Personal Protective Equipment as required.
- Participating in activities directed at preventing harm & promoting well-being in the workplace.
- Identifying, reporting & self-managing hazards where appropriate.
- Early and accurate reporting of incidents at work and raising issues of concern when identified.
PERSON SPECIFICATION

**POSITION TITLE:**

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<tr>
<th>Qualification</th>
<th>Minimum</th>
<th>Preferred</th>
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<tr>
<td>MB.Ch.B (or approved similar degree) with FRACP, or equivalent in general medicine from the Royal Australasian College of Physicians.</td>
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<td>Minimum of 4-5 years current and relevant work experience in New Zealand or a similar environment</td>
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<td>Holds a current annual practising certificate</td>
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<th>Experience</th>
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<td>Recent experience in an acute care setting and Respiratory Medicine</td>
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<td>Knowledge of the Treaty of Waitangi and its application to practice</td>
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<td>Committed to own ongoing professional development and actively contributes to own professional memberships and networks</td>
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<td>Demonstrates a good understanding of adult learning principles</td>
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<th>Skills/Knowledge/Behaviour</th>
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<tr>
<td>Patient focus provided by displaying personal qualities of; respect, politeness and empathy when interacting with patients and their family/whānau</td>
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<td>Good interpersonal skills to support junior staff by setting clear expectations, by encouraging and providing constructive feedback, and demonstrating solid leadership skills</td>
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<tr>
<td>Ability to promote a safe and quality focused work environment</td>
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| by demonstrating safe work practices, reviewing practice, identifying areas of improvement and acting accordingly, and initiating and participating in quality audits and risk management activities |   |