

JMO ORIENTATION PACKAGE

CAMPBELLTOWN HOSPITAL

2002

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Dr Andrew McDonald FRACP
Director Of Medical Education

**MACARTHUR HEALTH SERVICE
(CAMPBELLTOWN HOSPITAL)
A SURVIVAL GUIDE FOR ALL NEW MEDICAL STAFF
(new/relieving/locum agency).**

Welcome to Our Hospital.

This package is a survival kit to help you to become oriented to Campbelltown Hospital.

It is the minimum necessary to understand how the hospital works.

It is required reading.

How to get here / Parking:

Travelling along the M 5 Freeway, take the second Campbelltown exit left along Narellan Road.

On your first day, parking is available in the Visitors Car Park at the front of the hospital.

It is recommended that you park in the staff car park at the back of the hospital near the helipad.

Access is via a boom-gate key available from the cashier (behind switch) for a deposit of \$20-00 (refundable at the end of term).

Orientation:

Orientation is compulsory for all new staff.

JMOs allocated to Emergency Dept: please note that your name may not appear on the Emergency Dept Roster on the first day of term. This is to allow you to attend Orientation – it does not mean you have a day off.

Education and Training

The weekly Medical Education Program is

- Monday 12-1 a Medical tutorial
- Friday 12-1 , a Surgical tutorial

Sessions are held most days of the week mostly at lunch- time. Switch will issue a reminder page just before each session. '7777' signifies a teaching session about to start.

COMMUNICATION INFORMATION

Phones / Fax:

Hospital phone number is (02) 46343000.

Acute Services Support phone number is 43864 or 43858, fax is 43860 (ie 4643860).

Paging System:

You are responsible for making sure your page is in working order and turned on at all times while on duty.

Instructions: Dial " 8 2 wait for tone ... dial page number ... * ... wait for tone means page has been successful.

Once allocated, you keep the page for the whole term. Spare batteries are available from Acute Services Support and a few are kept at switch for Emergencies. The kiosk also sells batteries. Return the pager at end of term: you can be held liable for cost of replacement if lost or damaged due to carelessness.

The paging system is not a locating system. It does not indicate whether the pager is turned on or off - only that a signal has been sent.

PROFESSIONAL RESPONSIBILITY

Hours of Work:

- * Wards - Normal Hours of duty are 8.30 am to 5pm daily (8 hours) on week days with a half hour for lunch.
After hours are 5pm to 11pm.
Weekends are 8am to 11pm.

End of Shift

After hours cover on wards is very limited. So before going home at the end of the day, do try to complete all your day work, ie write up fluids for the next 24 hours, re-write medication charts and write up the pathology forms for the following day(s). This eases the load on the evening/night person. It is important to do this even if it means claiming occasional un-rostered overtime (which we will pay).

After Hours Cover

The cover on the wards is:

- 1 JMO on duty for the wards for evenings, and two for weekends (one 0800-1700 and one 1000-2300). After Hours can be busy for JMOs so if you are getting behind or you are unsure what to do, **get help!** Call the Senior in ICU or the After Hours Hospital Manager – all are available to assist.

- Usually One medical and one surgical registrar (check roster)
- 1 senior medical officer on in Intensive care/ CCU and as back-up to the ward JMO. You hand over to this person at the end of the shift.

Residents covering the wards after hours ie on evenings and weekends must collect the appropriate after hours pager from ICU at 5pm on week days and 8am on weekends. This is the code blue pager and it is essential that you carry it from the beginning of the shift. This must be handed back to the ICU Department at the end of the after hours shift.

Hand over.

At the conclusion of each shift it is your responsibility to conduct a thorough hand over with the medical officer next on duty. We have had numerous court cases where there was no documentation that this was done. If this is the case, both doctors tend to be involved in subsequent legal proceedings.

All new admissions and all sick patients in the wards and in Intensive Care are to be formally handed over to the Medical Officer responsible for ongoing care.

After Hours Registrar Cover: NB these Registrars are also on duty within the hospital

Obstets and Gynae Registrar on duty 24 hours a day.

Surgery on duty most evenings till midnight then on call overnight

Paediatrics on duty every day and evening 7 days a week until 12 midnight

Orthopaedics until 9 pm 7 days and night per week

Medical Registrar on duty some evenings and week ends (see roster)

The following important responsibilities are brought to your attention:

The hospital staffing is stretched and demand is high. When rostered for duty, your responsibility is to be available and contactable.

When on duty it is only permissible to leave the hospital or depart early if prior approval is given by Acute services support and cover for your patients has been arranged. It is not permissible to remain in the units near the roundabout as it is a long way to run in an arrest situation. In an emergency you must seek the approval of the After Hours Hospital Manager (see below).

You must start on time

After-hours Hospital Manager:

Contact on Page 39008 or via switch. They are there to help you and on your side.

This person is a senior member of the nursing staff and is responsible for the running of the hospital and managing beds after hours. The After Hours Hospital Manager has considerable expertise in

handling difficult problems and can assist you in a variety of ways. Do not hesitate to call, especially if you are feeling overwhelmed with your work-load, are faced with a difficult situation or having difficulty contacting a VMO.

Night duty runs from 11.00 pm to 8.30 am weekdays and 8.00 am on weekends.

During this period there are 2 senior doctors and an RMO on duty in the hospital. One senior and one RMO are based in the Emergency Department, the other senior covers both the wards and Intensive care.

ABSENCE

Absence from the hospital:

Any absence from the hospital whether sick leave, ADO, conference leave, any other reasons, must in every instance be notified Acute Services Support or after hours, the After Hours Hospital Manager, who will be responsible for notifying the relevant departments and for organising relief, etc.

ROSTERS.

The rosters are published every week in advance for medical staff and distributed to the pigeon holes. Copies are distributed to all other areas weekly. They are co-ordinated by Acute Services Support

Please check your roster carefully. Once the roster is published you are responsible for fulfilling your obligation.

Swaps are permitted only if the other party agrees.

When organising a roster swap you must do **three** things:

- 1 Notify Acute Services Support.
- 2 Record the change on the roster on the wall and in the "Swaps" book located in Acute Services Support.
- 3 Notify switch

HOW TO SURVIVE

ACCOMMODATION:

Contact the Hospitality Services Manager, Ms Pam Riley (page number 31511) for all accommodation, including overnight. You should consider accommodation, at least for the nights on call or when completing a late shift.

Accommodation is also available at Camden Hospital for staff and students at Campbelltown.

If using a room for a single night, please return the keys to the switchboard or to the Hospitality Services Manager first thing the next morning to enable the room to be organised for the next evening.

The hospital provides very limited cleaning service only. You are responsible for keeping the unit or room clean and disposing of linen and any rubbish.

A.D.O.'s

These are to be taken as they fall due. You need to arrange appropriate cover within your team, seek prior approval from Acute Services Support and notify switch. As relievers are not available to cover ADO's, as a general rule it is not permissible to take ADO's in blocks. If you can't take them due to workload, speak to me.

Pay

Time sheets MUST be in Acute Services Support by 9am on the Tuesday prior to the end of the pay period to enable pays to be processed. You must initial any alterations to the timesheet. You need to include your employee number and cost centre in order to be paid.

If you -

- * Have a Sick day, notify Acute Services Support and your team (in hours) or the After Hours Hospital Manager as soon as possible,
- * Plan an ADO, FACS day, study leave, annual leave, arrange this beforehand with Acute Services Support and fill out a leave form as soon as possible.
- * Do any un-rostered overtime, advise Acute Services Support first thing the next morning

Pay slips are put into the Doctor's pigeon- holes late Thursday afternoon following the completion of the pay period.

Computers for JMOs

Available in the RMO room. The room is accessed via a key you will receive on day 1 of the term.

Lockers

Lockers are provided to Medical Staff in the Common Room on the understanding that you provide your own padlock and remove the contents at the end of your attachment here. If this is not done, the locker will be opened and the contents held in storage in Acute Services Support.

Meal Tickets

These are provided to Interns, Residents and Registrars working a **rostered shift longer than 13 hours**. Meal tickets may only be obtained on the day of the intended shift Acute Services Support during office hours. For those working weekends or a public holiday, a meal ticket may be obtained on the last working day prior to the weekend/holiday.

Travel Allowance

If you are a seconded medical officer, Campbelltown Hospital will pay you travel allowance. If you stay in the units, we will pay for you to travel home once a week.

Harassment Free Work Place.

There is no excuse for harassment.

Campbelltown hospital is meant to be a harassment free workplace. SWSAHS has made this official policy (1996).

If you feel you are being harassed, see The DCT or Human resources.

CLINICAL DOCUMENTATION

You are expected to see every patient under your care at least once a day and to document in the record every

- | | |
|-------------------------------------|----------------------------------|
| * occasion of service, | * significant event |
| * change of treatment and rationale | * clinically significant finding |
| * any explanation given to patient. | * every test |

Your notes need to be:

- * Legible
- * Signed off with PRINTED name and your designation
- * Errors are to be crossed out with a single line and your initial.
- * Notes must be contemporaneous with date and time.

Never write disparagingly. The notes are subject to scrutiny through Freedom of Information, subpoenas, other colleagues and research.

Clinical Manual

This is the authoritative medical policy and procedure document for Campbelltown Hospital. It must be followed. Copies are kept in the Nurse Unit Managers Office on each ward.

It is a good idea when starting to look at the index and browse through the manual to get an idea of its contents.

Procedures-- multiple attempts at:

A maximum of three attempts at IV cannulation is allowed before help is sought. This applies to paediatric and adult patients.

For more invasive procedures, In general it is recommended that

- a maximum of two attempts at a procedure be made before enlisting the help of a more senior colleague.
- RMOs not attempt procedures that they feel they are unable to do

Resources available on each ward:

Clinical Manual, MIMS Annual and Bimonthly, P.B.S. Book, Antibiotic Guidelines (some wards).
Assessing fitness to Drive (guidelines for Health Professionals).

ADMISSIONS

Consultants / (VMO's).

Most of the consultants are Visiting Medical Officers (VMOs), therefore based off site.

You are required to make sure the VMO knows about every admission. You are required to promptly inform the VMO of any deterioration in a patient's condition. The quickest way to contact the appropriate VMO on call, especially after hours, is through switch.

If a VMO cannot be contacted, or there is a dispute on management or the VMO will not come in when asked, then contact the After Hours Hospital Manager on page 39008 for advice. This applies at any time of the day or night.

Daily patient list.

A list of patients according to specialty and consultant is printed each morning. The list is printed by the admissions office (located behind switch). It is updated at 6am each day. The list can be collected from Switch each morning.

EMERGENCY ADMISSIONS

The Ed is a very busy department. There are few cubicles and there is often pressure to sort out problems quickly and move patients out of the department.

Without exception every patient admitted through the Emergency Department is to be handed over to the Visiting Medical Officer or the Registrar responsible for care before leaving the department.

New Admissions to Ward:

All patients admitted via the Emergency Department are to be reassessed on the ward by the ward resident. This is a safety mechanism to ensure that important items are followed up promptly. This assessment need not be lengthy, but you may need you need to check that the VMO is aware of the admission and current clinical condition of the patient:

Direct admissions to the ward including after hours to be admitted by the Ward Resident

EMERGENCIES

Dial 333 for all emergencies (for more detail consult the Emergency Responses Procedure Manual).

Medical Emergency - Code Blue - Not just for cardiac arrest, the medical emergency team (MET) is to be called for all patients whose condition or vital signs are deteriorating (see criteria below) A low threshold for calling this code is expected. The rationale is that earlier intervention by the MET team may prevent an arrest situation developing.

The criteria for calling Code Blue include:

- * Threatened Airway
- * All respiratory arrests
- * Oxygen saturation < 85%.
- * Respiratory rate < 6 or > 36 per minute.
- * Pulse rate < 40 or > 140 per minute.
- * Systolic BP < 90.
- * Sudden change level of consciousness
- * Repeated or prolonged seizures.
- * Any patient staff are concerned about.

More details and critical care protocols in Clinical Manual. A certain amount of 'over-calling' is expected.

Senior Staff are expected to be supportive of any junior staff calling a Code Blue.

DISCHARGES

Transfer out of critically ill patients le patients who require an ICU bed.

If you have any trouble finding a bed for a critically ill patient then contact Medical Retrievals on Telephone **1800-650004** (Careflight, Westpac) who will advise where an ICU bed is available.

You will then need to contact the receiving hospital to discuss the patient. Medical Retrievals will then come and collect the patient and advise on interim management.

Discharge summaries

Can mount up alarmingly, so you are encouraged to be brief. Importantly, a discharge summary is still required for deceased patients.

ALLIED HEALTH

Pharmacy

The hospital does not provide Discharge Scripts, so outside scripts need to be written.

In prescribing PRN narcotics you need to stipulate a maximum number of doses or duration.

Pathology

Extension 43322

The laboratory performs basic tests only. The hours of operation are 7.30 am till mid-night seven days a week. From mid-night to 7.30 am there is an on-call technician available for cross-matching only.

A courier service transports specimens to Liverpool every 2 hours round the clock seven days a week.

The tests performed on site at Campbelltown are electrolytes, urea, creatinine, glucose, calcium, amylase, blood gases, pregnancy test, paracetamol and salicylate screens, full blood count / ABC and all blood banking.

Routine specimens are collected by Pathology around 8.30 am and 1.30 pm on weekdays and 8.30 on weekends.

Computer access to path results.

Use Option 22. The password is pill.

Signing Off forms

You are expected to sign off all pathology, x-ray, ECG and other hard copy results each day prior to going off duty.

X-rays (Medical Imaging).

Hours of opening are 8.00 am to 1.00 am, seven (7) days a week. After hours a Radiographer is on call. The x-ray department does basic radiology, CT Scans as well as ultrasound in hours only.

If you require an x-ray **urgently**, it is best to ring the Department directly to organise that

I, (Print full name) _____

acknowledge that I have read and understood the contents of the Survival Guide.

Signed: _____

Designation: _____

Term: _____

Seconded from:/...../..... to:/...../.....

Date:/...../.....

LOCUM MEDICAL OFFICERS only:

Locums need to read this survival kit.

Any Locum working a shift at Campbelltown Hospital must fill out an “Agency Staff Employment Form” and a tax form on their initial shift. Any subsequent shifts do not need the forms filled out unless it is more than two months since their previous shift (Workforce pay system automatically deletes any medical officer who has not worked a shift for two months), in which case another “Agency Staff Employment Form” and tax form must be filled out.

