

SECTION TWO – HOUSE STAFF

POLICY NO: 2.4

SUBJECT: RESPONSIBILITIES OF HOUSE STAFF

I. PURPOSE

To provide guidelines to house staff regarding their general responsibilities as an SPUH house officer. Specific responsibilities shall be further described by each Postgraduate Program and/or provided for in the House Staff Agreement.

II. RESPONSIBILITIES/REQUIREMENTS

A. General.

House staff are expected to take advantage of the educational opportunities offered within SPUH and provide medical treatment to SPUH's patients in a competent and caring manner. Moral, ethical, and professional behavior is expected at all times. Each house officer is accountable to his or her Program Director and/or Department Chair for all matters pertinent to the professional care of patients.

B. Program Requirements: House Staff Participation in Educational and Professional Activities.

The ACGME defines six areas of general competencies, which each house officer must be able demonstrate upon completion of a Postgraduate Program. Each Postgraduate Program must define the specific knowledge, skills, attitudes, and educational experiences required by each house officer; and provide educational experiences as needed in order for house staff to demonstrate, at a minimum, the following essential abilities:

1. Patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health. In light of this requirement, house staff shall be expected to:
 - (a) communicate effectively and demonstrate caring and respectful behavior when interacting with patients and their families;
 - (b) gather essential and accurate information about their patients;
 - (c) make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment;
 - (d) develop and carry out patient management plans;
 - (e) counsel and educate patients and their families;
 - (f) use information technology to support patient care decisions and patient education;
 - (g) perform competently all medical and invasive procedures considered essential for their specific area of specialty;
 - (h) provide health care services aimed at preventing health problems or maintaining health; and
 - (i) work with health care professionals, including those from other disciplines, to provide patient-focused care;
2. Medical knowledge about established and evolving biomedical, clinical and cognate (i.e., epidemiological and social-behavioral) sciences and

the application of this knowledge to patient care. In light of this requirement, house staff shall be expected to:

- (a) demonstrate an investigatory and analytic thinking approach to clinical situations; and
 - (b) know and apply appropriate basic and clinically supportive sciences;
3. Practice-based learning and improvement that involves investigation and evaluation of their own patient care, appraisal and assimilation of scientific evidence, and improvements in patient care. In light of this requirement, house staff shall be expected to:
- (a) analyze practice experience and perform practice-based improvement activities using a systematic methodology;
 - (b) locate, appraise, and assimilate evidence from scientific studies related to their patients' health problems;
 - (c) obtain and use information about their own population of patients and the larger population from which patients are drawn;
 - (d) apply knowledge of study designs and statistical methods to the appraisal of clinical studies and other information on diagnostic and therapeutic effectiveness;
 - (e) use information technology to manage information, access on-line medical information; and support their own education; and
 - (f) facilitate the learning of students and other health care professionals;
4. Interpersonal and communication skills that result in effective information exchange and teaming with patients, their families, and other health professionals. In light of this requirement, house staff shall be expected to:
- (a) create and sustain a therapeutic and ethically sound relationship with patients;
 - (b) use effective listening skills and elicit and provide information using effective nonverbal, explanatory, questioning, and writing skills; and
 - (c) work effectively with others as a member or leader of a health care team or other professional group;
5. Professionalism as manifested through a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population. In light of this requirement, house staff shall be expected to:
- (a) demonstrate respect, compassion, integrity, and a responsiveness to the needs of patients and society that supercedes self-interest;
 - (b) demonstrate accountability to patients, society, and the profession and a commitment to excellence and ongoing professional development;
 - (c) demonstrate a commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices;
 - (d) demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities; and
 - (e) maintain a professional appearance, comportsment, and conduct;

6. Systems-based practice as manifested by actions that demonstrate an awareness of and responsiveness to the larger context and system for health care and the ability to effectively call on system resources to provide care that is of optimal value. In light of this requirement, house staff shall be expected to:
 - (a) understand how their patient care and other professional practices affect other health care professionals, the health care organization, and the larger society, and how these elements of the system affect their own practice;
 - (b) know how types of medical practice and delivery systems differ from one another, including methods of controlling health care costs and allocating resources;
 - (c) practice cost-effective health care and resource allocation that does not compromise quality of care;
 - (d) advocate quality patient care and assist patients in dealing with system complexities; and
 - (e) know how to partner with health care managers and health care providers to assess, coordinate, and improve health care and know how these activities can affect system performance.

C. Routine Responsibilities:

Routine responsibilities of each house officer, include, but are not limited to the following:

1. attending and actively participating in all conferences and teaching rounds within the assigned department;
2. rendering appropriate medical care to patients in a kind, caring manner under the supervision of the attending/consulting physician, and providing such care to all patients assigned regardless of diagnosis or ability to pay;
3. attending assigned clinics;
4. being on time for all assignments;
5. participating in research projects and quality improvement activities of the Postgraduate Program;
6. respecting the confidential nature of all information relating to SPUH patients;
7. respecting SPUH property;
8. documenting care and signing patient charts/medical records in a timely manner in accordance with the SPUH policies and procedures;
9. participating on appropriate SPUH committees and councils;
10. applying cost containment measures to the provision of patient care;
11. responding to pages on a timely basis;
12. notifying the Program Director, if unable to attend scheduled activities;
13. maintaining a professional appearance, comportment, and conduct;
14. assuming progressive responsibilities as the house officer gains experience;
15. Contributing to the overall success of the operation within the Department and SPUH;
16. cooperating with nursing and support staff;

17. keeping the Program Director informed of any special difficulties encountered in promptly and satisfactorily servicing patients and any and all patient complaints relating to the scope, method, or results of services performed;
18. Complying with any additional requirements set forth in the Postgraduate Program's policies and procedures; and
19. Performing other duties, as may be assigned by the Program Director.

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