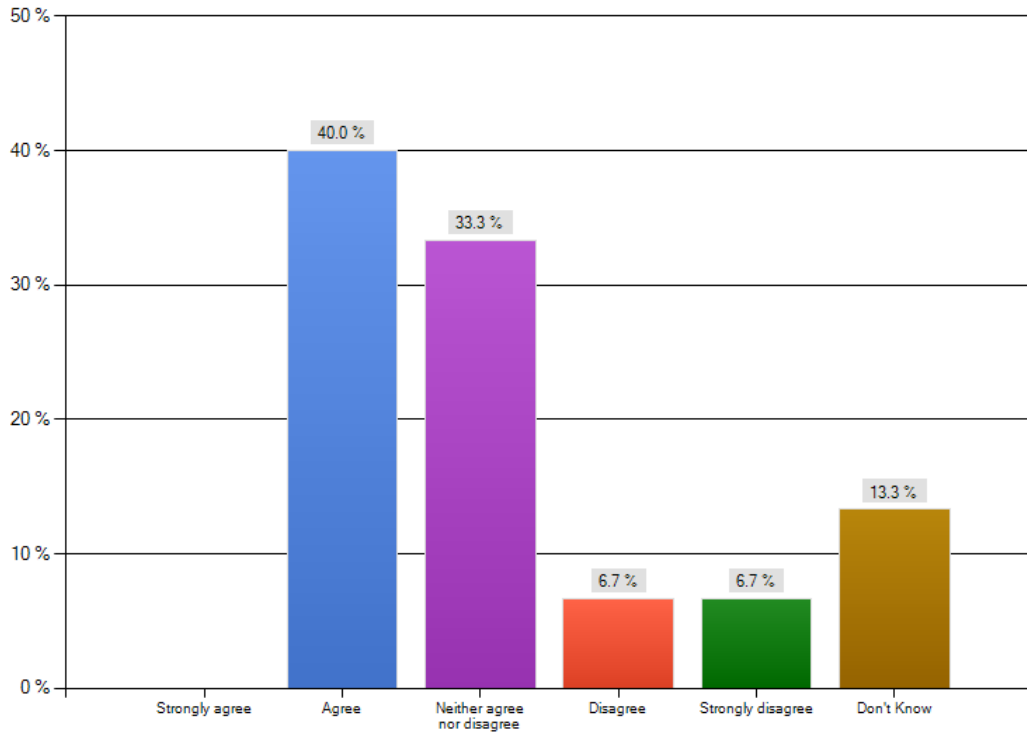


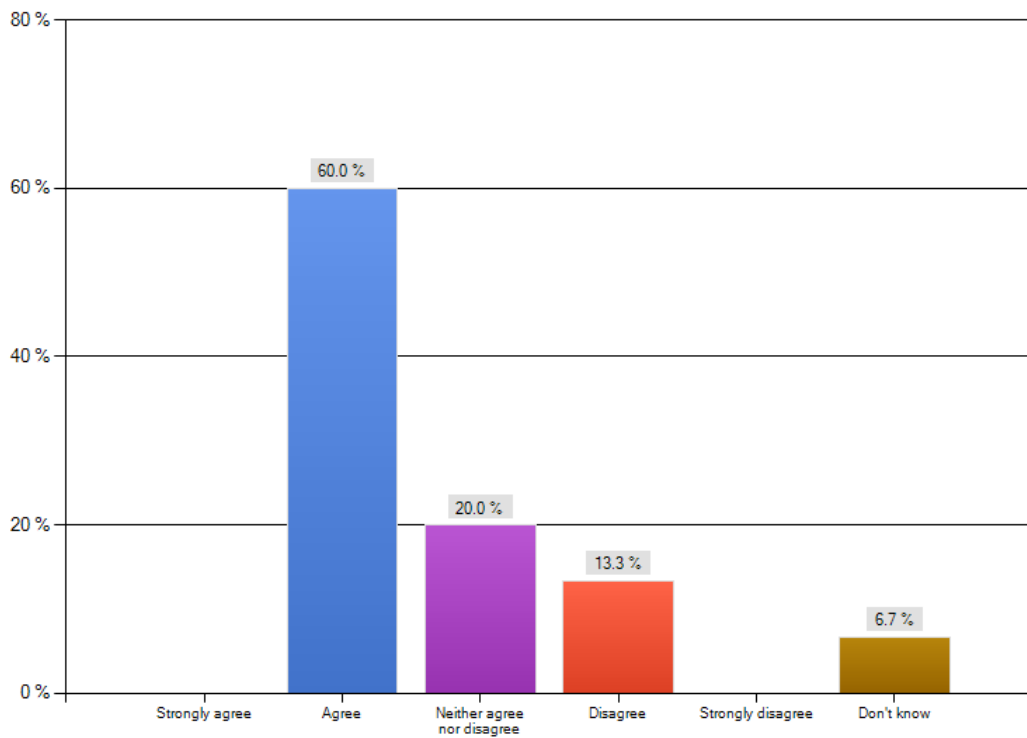
NORTHLAND

This section summarises the results of Northland DHB. *Indicates respondents could choose more than one option.

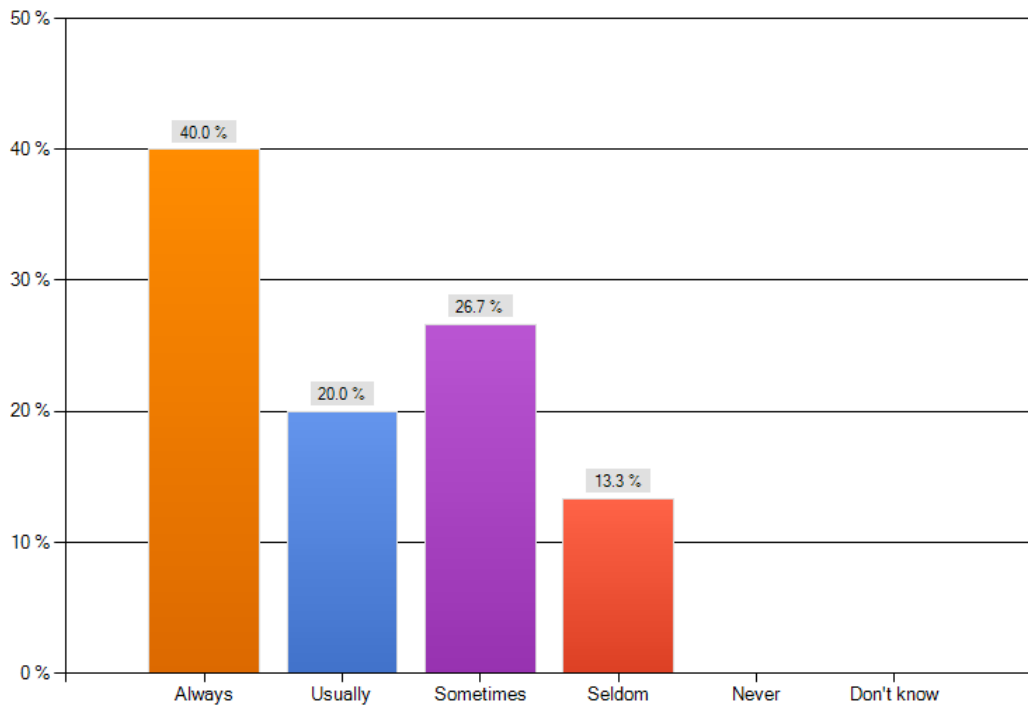
At our hospital House Officers are confident when they start nights.



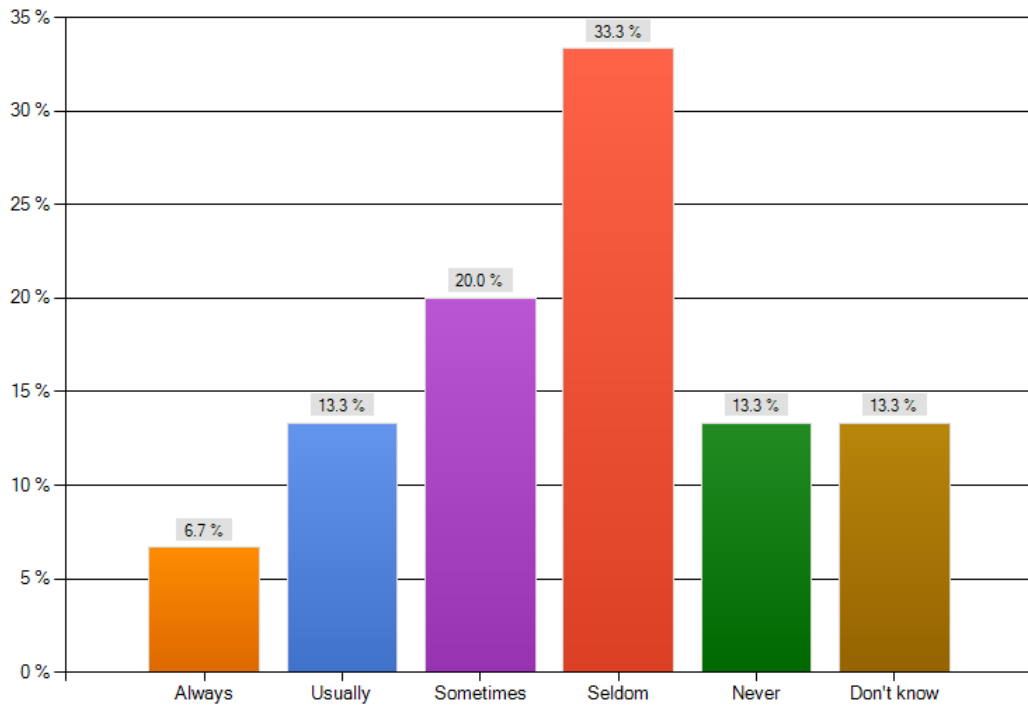
At our hospital House Officers are proficient when they start nights.



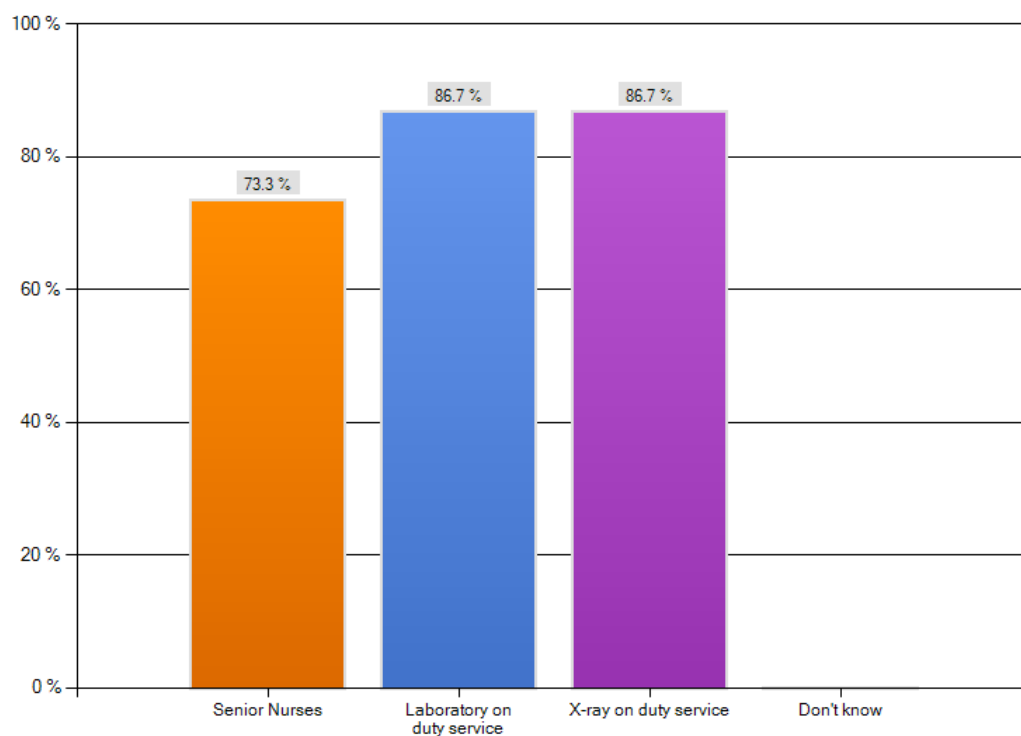
A medical registrar is available and able to provide direct supervision to house officers at night.



A surgical registrar is available and able to provide direct supervision to house officers when on nights.

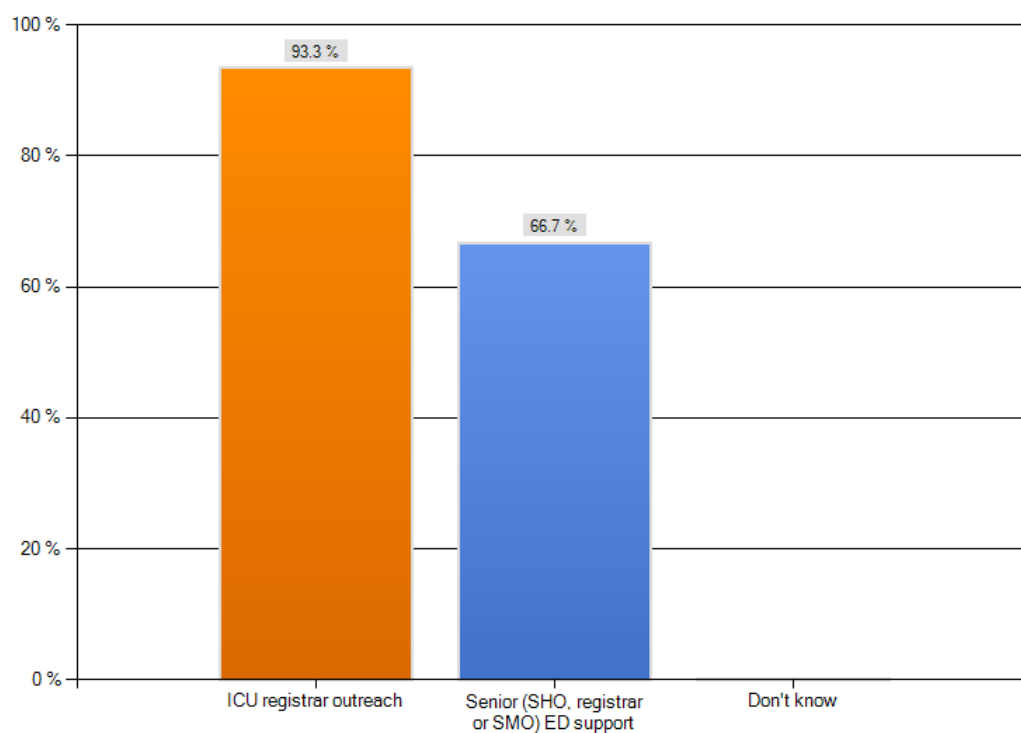


The following additional support staff are available on nights (tick where appropriate):-



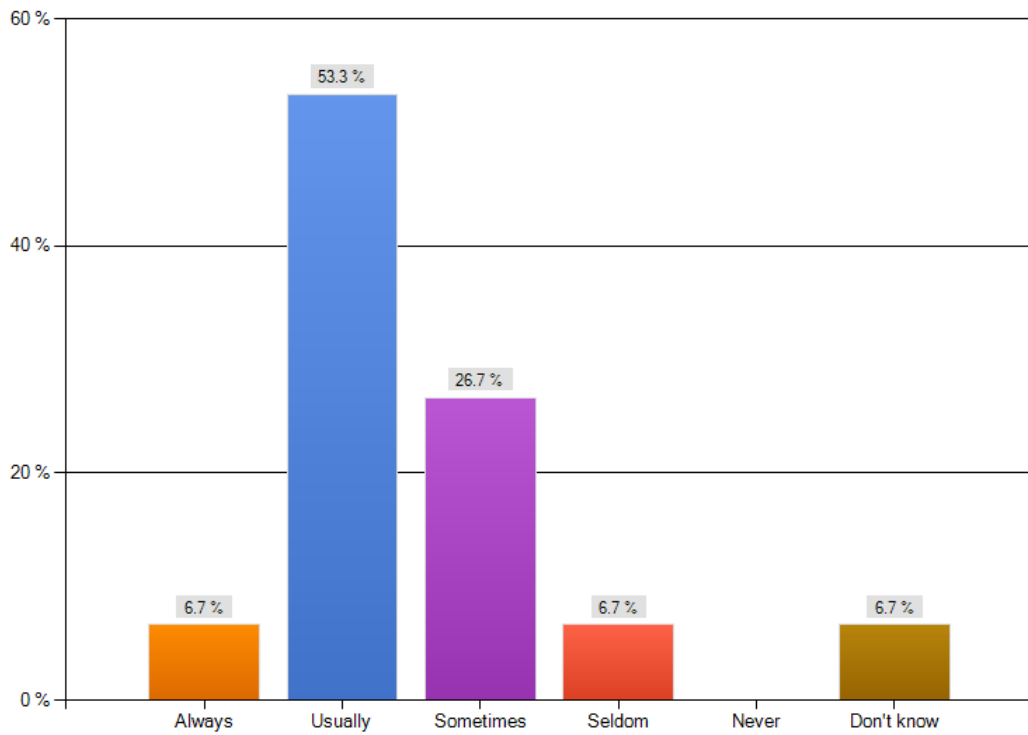
*

There is additional medical support at night from the following (tick where appropriate).

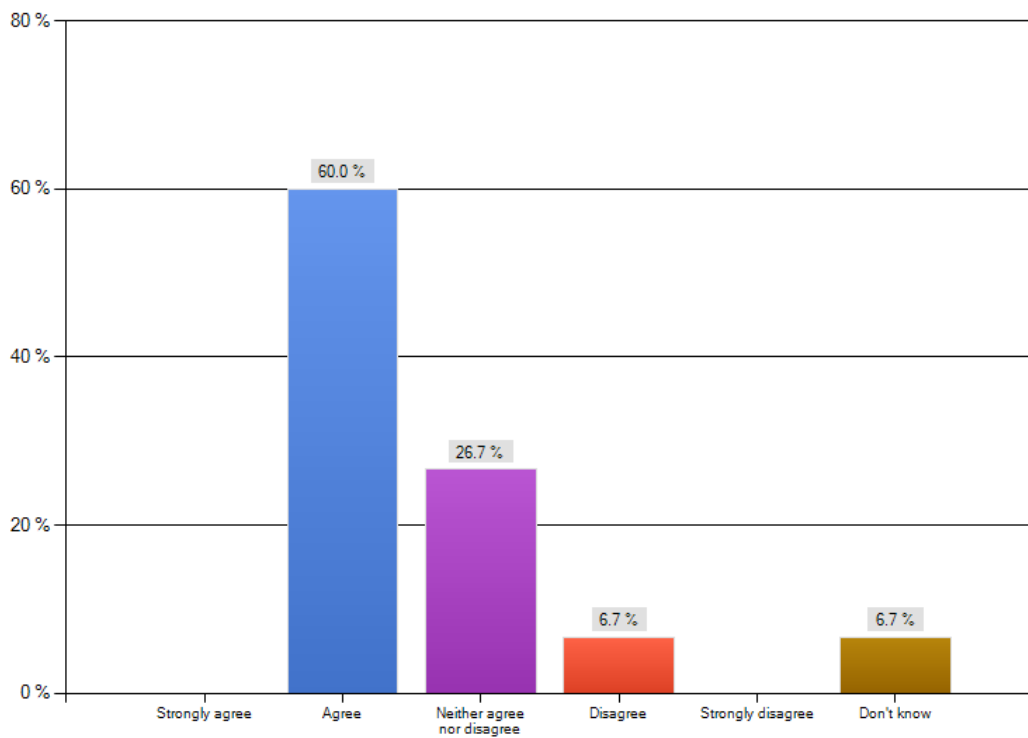


*

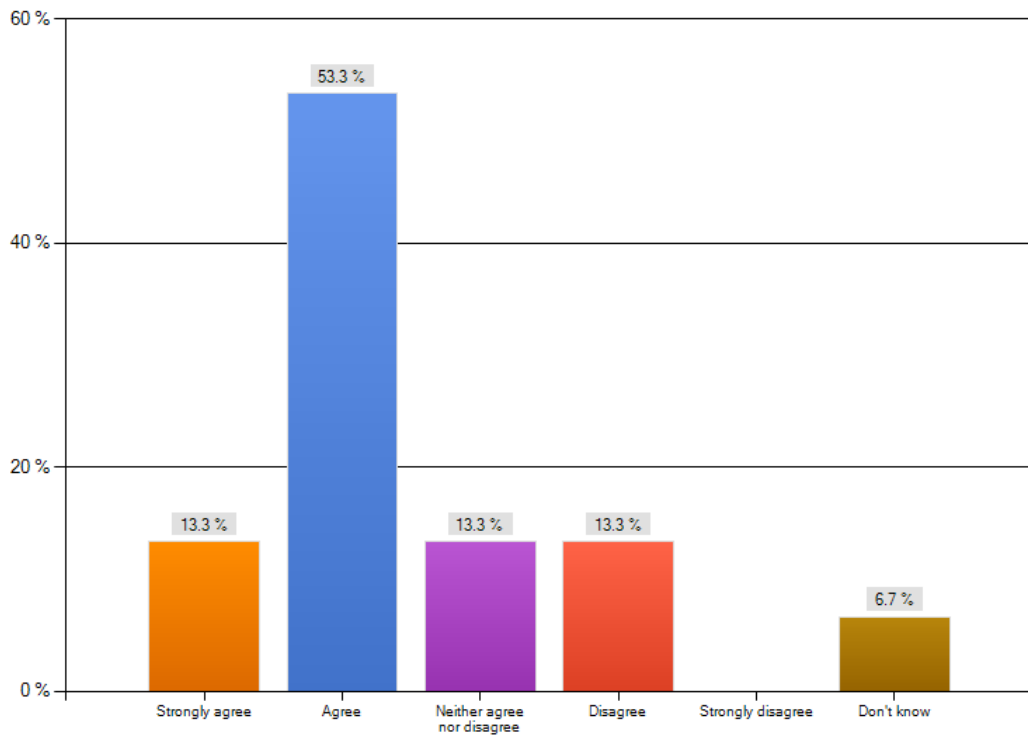
When on nights RMOs are required to only do what needs to be done.



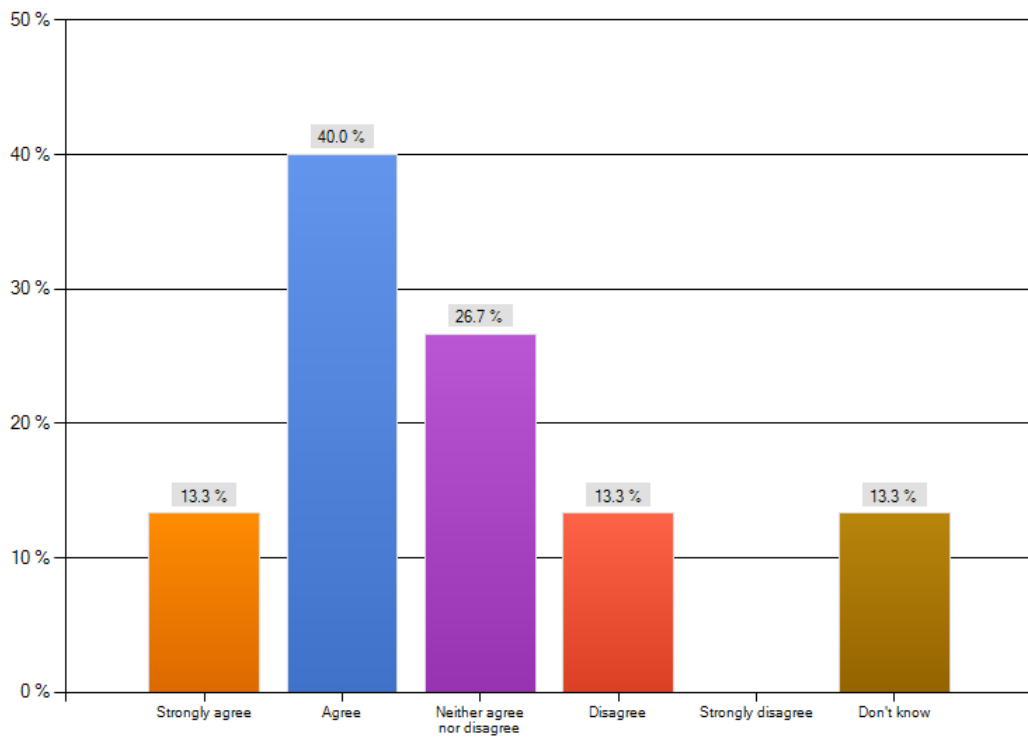
Overall medical staffing is at appropriate levels at night.



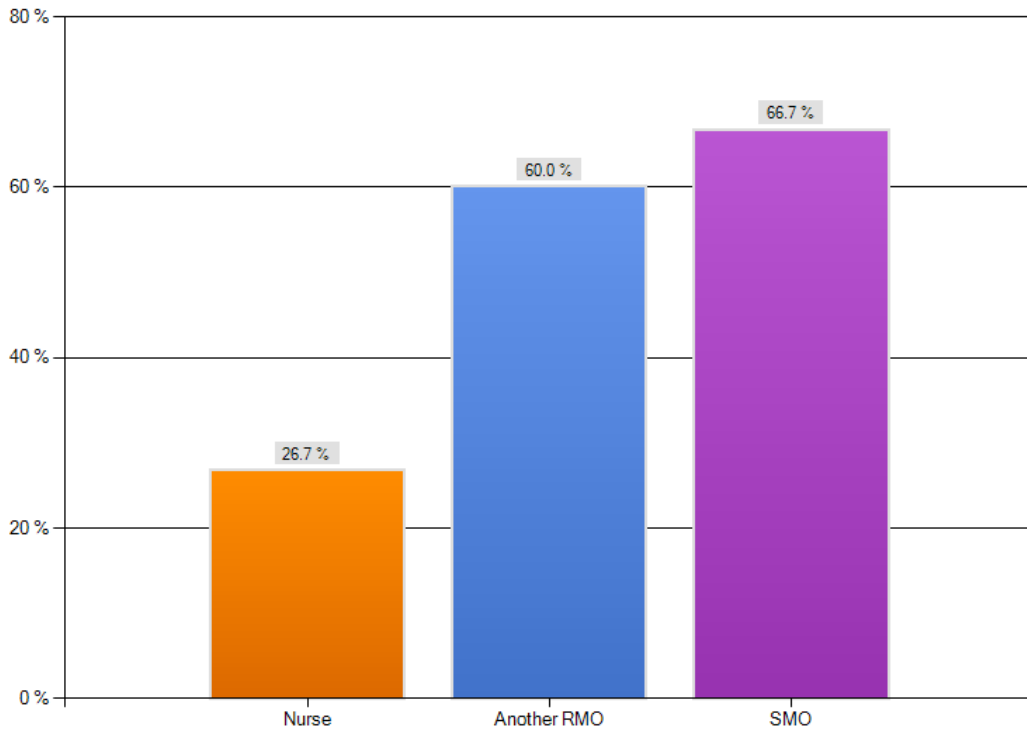
Handover is effective and supported.



There are well established escalation processes if house officers need help.

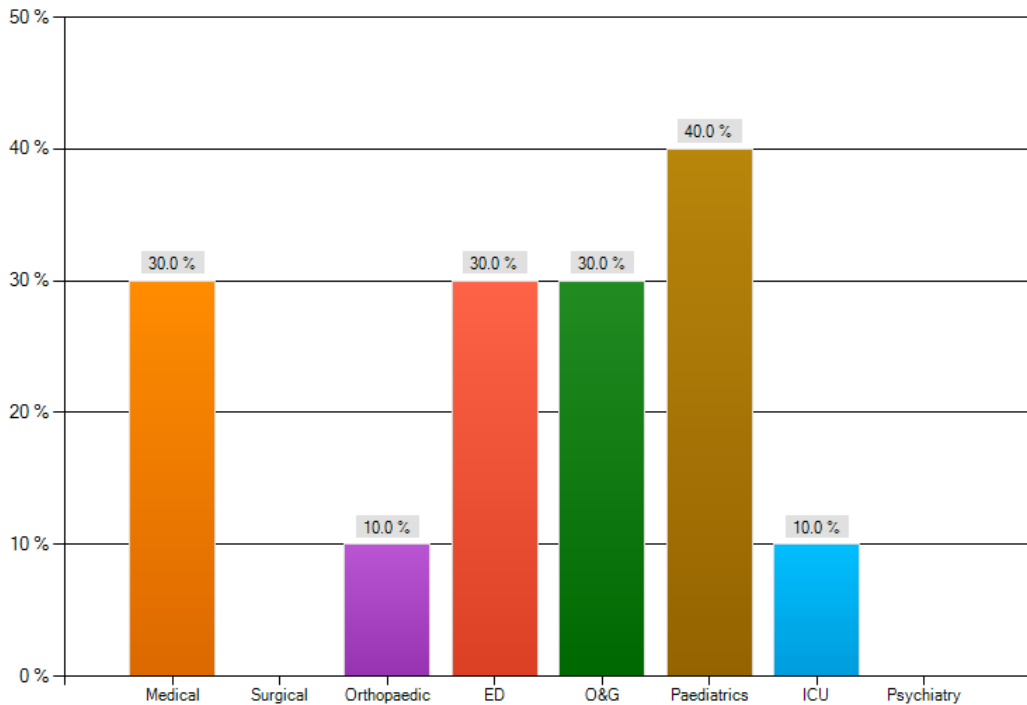


For support or assistance on nights do you call:-



*

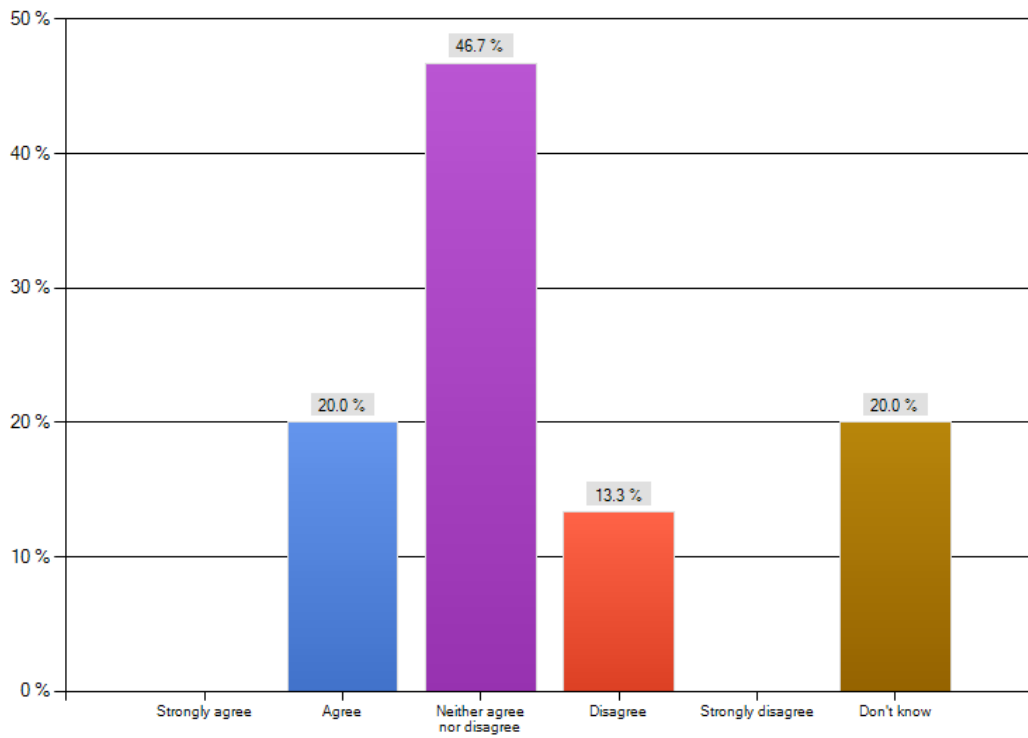
If you answered "SMO" to the previous question please indicate below on which specialties are the SMOs approachable and responsive:



1,*

¹ Comments: "Hard to say in areas where I don't have experience...Misleading question"; "This is my specialty. I don't interact with others at night"; "I only work in Medicine"; "Anaesthetics"

The house officers received adequate and appropriate orientation to nights.



Is there an assessment or audit process in place that monitors safety for RMOs and their patients on nights.

