

**MEDICAL RESPONSIBILITY
PROTOCOL**

STANDARDS TO BE MET

1. The consultant on-call is ultimately responsible for the patients admitted under his / her care, and should be kept reasonably informed regarding their condition.
2. House officers and registrars work under delegated responsibility.
3. House officers and registrars have a responsibility to remain within their area of competence and to seek assistance when required.
4. In general, the consultant should be contacted by a registrar. House officers should seek the assistance of the relevant registrar. If the registrar is not available then the house officer should contact the consultant.
 - 4.1 RMO staff must be aware of the MEWS system in order to respond appropriately to a deteriorating patient when alerted by nursing staff.
5. If the Responsible Consultant is not available, or not on call, then the on-call consultant for that specialty **MUST** be contacted under the following circumstances:
 - 5.1 Any patient who is seriously ill or is sufficiently ill to require admission to ICU or HDU.
 - 5.2 Any patient who, after admission, requires acute transfer to another service or hospital.
 - 5.3 Any patient in whom the diagnosis or management is unclear, and for whom delay of management until the next ward round would be inappropriate.
 - 5.4 Any patient who deteriorates or dies unexpectedly.
 - 5.5 Any death that is to be reported to the coroner.
 - 5.6 If requested by the nurse / midwife in charge of the ward at the time.
 - 5.7 If a patient appears to have had a complication following a procedure with which junior staff are not familiar.
 - 5.8 It is recommended that the SMO on call be contacted at the end of each shift by the most senior member of the RMO Team to discuss any unstable or concerning patients.
6. These instructions may be varied by consultants in charge of each team depending on the skills and experience of the junior staff.

In the absence of specific instructions to the contrary this document should be deemed to apply.

ASSOCIATED DOCUMENTS

- Bay of Plenty District Health Board policy 6.1.2 Medical Responsibility for Patient Care
- Bay of Plenty District Health Board policy 6.1.2 protocol 2 Medical Responsibility for Patient Care - Admission, Handover of Responsibility & Care Management
- Bay of Plenty District Health Board policy 6.10.2 Clinical Communication
- Bay of Plenty District Health Board policy 2.5.2 protocol 1 Health Record Standards
- Bay of Plenty District Health Board policy 2.5.2 protocol 2 Health Record - Content & Structure
- Bay of Plenty District Health Board policy 6.4.1 Patient Transfers
- Bay of Plenty District Health Board Mental Health & Addictions Service protocol MHAS.A1.9 Transfer of Care
- Bay of Plenty District Health Board Adult Observation Chart (145337)
- Bay of Plenty District Health Board RMO Handbook

Issue Date: Feb 2016	Page 1 of 1	NOTE: The electronic version of this document is the most current. Any printed copy cannot be assumed to be the current version.
Review Date: Feb 2019	Version No: 4	
Document Steward: Medical Director	Authorised by: Chief Operating Officer	