

## Staff Specialist Employment Arrangements across more than one Public Health Organisation

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**Functional Sub group** Corporate Administration - Finance  
Personnel/Workforce - Industrial and Employee Relations

**Summary** The Policy Directive has been developed to provide for more consistent arrangements and to fill perceived gaps in arrangements when staff specialists and staff specialist pathologists are required to work across Local Health Districts (LHDs) and Specialist Health Networks (SHNs).

**Replaces Doc. No.** Staff Specialist Employment Arrangements Across More Than One Public Health Organisation [PD2014\_014]

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**Applies to** Local Health Districts, Chief Executive Governed Statutory Health Corporations, Specialty Network Governed Statutory Health Corporations, Affiliated Health Organisations, Public Health System Support Division, NSW Ambulance Service, Ministry of Health, Public Health Units, Public Hospitals, NSW Health Pathology

**Audience** Administration, staff specialists, staff specialists pathologists

**Distributed to** Public Health System, Health Associations Unions, NSW Ambulance Service, Ministry of Health

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**Policy Manual** Not applicable

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**Status** Active

### Director-General

This Policy Directive may be varied, withdrawn or replaced at any time. Compliance with this directive is **mandatory** for NSW Health and is a condition of subsidy for public health organisations.

## STAFF SPECIALIST EMPLOYMENT ARRANGEMENTS ACROSS MORE THAN ONE PUBLIC HEALTH ORGANISATION

### PURPOSE

This Policy Directive sets out the arrangements to apply for staff specialists who as part of their employment, are required to provide services across more than one Public Health Organisation (PHO). (For the purposes of this Policy Directive, staff specialists are defined as including clinical academics.)

### MANDATORY REQUIREMENTS

The provisions set out in the attached procedure apply only where services are provided for more than one PHO as part of the one employment contract and arise under an agreement between the PHOs involved. They do not apply where a staff specialist has separate part time employment contracts with more than one PHO.

### IMPLEMENTATION

**Chief Executives must ensure that:**

- The arrangements in this Policy Directive are communicated to all managers and staff involved in the engagement of staff specialists.

**Directors of Workforce / Human Resources and Directors of Medical Services must ensure that:**

- The arrangements set out in the attached procedures apply when staff specialists are required as part of their employment to provide services across more than one PHO.

### REVISION HISTORY

Version	Approved by	Amendment notes
PD2016_026 June-2016	Deputy Secretary, Governance, Workforce and Corporate	Revised policy to include arrangements for staff specialist pathologists.
May 2014 (PD2014_014)	Deputy Secretary	New policy

### ATTACHMENT

1. Staff Specialist Employment Arrangements across more than one Public Health Organisation: Procedures.

## **Staff Specialist Employment Arrangements across more than one Public Health Organisation**



**Issue date:** June-2016

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## CONTENTS

<b>1</b>	<b>BACKGROUND.....</b>	<b>1</b>
1.1	About this document.....	1
1.2	Definitions .....	1
<b>2</b>	<b>VISITING PRACTITIONER APPOINTMENTS FOR OUTREACH SERVICES.....</b>	<b>1</b>
<b>3</b>	<b>DETERMINING CLINICAL PRIVILEGES / SCOPE OF CLINICAL PRACTICE.....</b>	<b>2</b>
<b>4</b>	<b>STAFF SPECIALIST RIGHTS OF PRIVATE PRACTICE .....</b>	<b>2</b>
<b>5</b>	<b>TESL.....</b>	<b>2</b>
<b>6</b>	<b>TMF INDEMNITY COVER .....</b>	<b>2</b>
<b>7</b>	<b>MEDICAL STAFF COUNCILS.....</b>	<b>3</b>
<b>8</b>	<b>STAFF SPECIALIST PATHOLOGISTS.....</b>	<b>3</b>
<b>9</b>	<b>LIST OF ATTACHMENTS .....</b>	<b>4</b>

## **1 BACKGROUND**

### **1.1 About this document**

This Policy Directive sets out the arrangements to apply when staff specialists are required as part of their employment to provide services across more than one public health organisation (PHO), for example when:

- There is a partnership or 'outreach' arrangement between PHOs whereby one PHO has agreed to provide staff specialists to provide services in another PHO
- There are joint on call rosters at facilities, operated by different PHOs, which are co-located or in close proximity to each other.

The arrangements for staff specialist pathologists', who are employed through NSW Health Pathology, are set out in Clause 8. All other sections do not apply to staff specialist pathologists'.

### **1.2 Definitions**

The terms 'parent' PHO and 'receiving' PHO will be used in this Policy Directive. The parent PHO is the one through which the staff specialist is engaged and generally would be that at which the majority of the working time of the staff specialist is spent, but may be as otherwise agreed between PHOs.

## **2 VISITING PRACTITIONER APPOINTMENTS FOR OUTREACH SERVICES**

Each staff specialist who provides services in another PHO should be appointed as a visiting practitioner at the receiving PHO under s.77 (b) of the *Health Services Act 1997* (i.e. a visiting practitioner appointed otherwise than under a service contract). As there is no service contract involved, the appointment can be made by letter. A pro forma letter is provided at **Attachment 1**. There is no need to advertise the position of a visiting practitioner where an appointment is made under the arrangements dealt with in this Policy Directive.

The employment relationship with the staff specialist is managed by the parent PHO. The services provided at the receiving PHO are provided in the course of the staff specialist's employment that is managed by the parent PHO. The parent PHO manages all aspects of the employment, such as payroll and leave. However day to day management may be delegated to the receiving PHO including such matters as leave approval. The appointment as a visiting practitioner at the receiving PHO is only to formalise the status of the staff specialist at the receiving PHO and to enable the staff specialist's clinical privileges / scope of clinical practice to be determined at facilities in the receiving PHO (consistent with the agreement or arrangements between the two PHOs). An appointment as a visiting practitioner at the receiving PHO under this Policy Directive is conditional on the person being employed as a staff specialist at the parent PHO and

being required, either actually or potentially, to provide services as a staff specialist at the receiving PHO. It is to be terminated when these conditions do not apply.

### **3 DETERMINING CLINICAL PRIVILEGES / SCOPE OF CLINICAL PRACTICE**

Under clause 55 of the Model By-Laws, the role of the Medical and Dental Appointments Advisory Committee (MADAAC) is to 'provide advice and, where appropriate, make recommendations with reasons to the Chief Executive concerning the clinical privileges (i.e. scope of clinical practice) which should be allowed to visiting practitioners'. Hence, a visiting practitioner appointment involves and requires a determination of clinical privileges / scope of clinical practice at the receiving PHO.

The clinical privileges / scope of clinical practice in respect of practice at each separate facility needs to be determined taking into account the role delineation of that facility and the particular service needs of that facility. Accordingly there needs to be a separate determination of clinical privileges / scope of clinical practice at each facility of the receiving PHO at which the staff specialist will provide services.

### **4 STAFF SPECIALIST RIGHTS OF PRIVATE PRACTICE**

In general, rights of private practice arrangements should be based on and managed by the parent PHO, including in respect of services provided at the receiving PHO. This means that:

- The parent PHO acts as the billing agent including for private practice billable services provided at the receiving PHO
- The revenue is received by the parent PHO
- For Level 2 to 5 staff specialists the revenue is placed in the No 1 Account of the parent PHO, and the residual flows through by way of an annual infrastructure charge to a No 2 Account managed by the parent PHO.

PHOs are able to enter into arrangements as part of the agreements between them to share the revenue which the parent PHO derives from private practice activities in the receiving PHO, including in respect of the facility charges that are involved. This is a matter between the PHOs, and does not impact on the staff specialist's remuneration arrangements.

### **5 TESL**

TESL entitlements are managed by the parent PHO. No separate TESL entitlements arise from the services provided at the receiving PHO.

### **6 TMF INDEMNITY COVER**

The TMF indemnity cover applying at the parent PHO will continue to apply to the services at the receiving PHO provided by a staff specialist. A visiting practitioner who is not a VMO or an HMO is not able to enter into a TMF contract of liability coverage, hence there are no separate TMF arrangements arising from the visiting practitioner

appointment at a receiving PHO. Any claims arising from the provision of services at the receiving PHO will need to be managed by the parent PHO in consultation as necessary with the receiving PHO.

Any contract of liability coverage for rural and / or paediatric patients which has been entered into by a staff specialist and their parent PHO also has effect in respect of any services in a receiving PHO provided under the arrangements set out in this Policy Directive.

## **7 MEDICAL STAFF COUNCILS**

Under clause 23 of the Model By-Laws, medical staff councils are composed, inter alia, of all visiting practitioners. Hence appointment as a visiting practitioner at a receiving PHO will bring automatic appointment to the medical staff council of the receiving PHO.

## **8 STAFF SPECIALIST PATHOLOGISTS**

Where staff specialist pathologists provide services for NSW Health Pathology and a PHO, an agreement between the two agencies should be concluded regarding:

- The nature of each role the staff specialist is required to perform, including laboratory and clinical privileges required, supported with separate role descriptions
- Which agency will be the host agency (e.g. NSW Health Pathology or the PHO) and therefore be responsible for managing the employment arrangements of the staff specialist pathologist, including the provision of TESL entitlements and TMF coverage
- The split between NSW Health Pathology and the PHO (based on FTE or part time employment as applicable) which will apply for appropriating employee related costs for the purposes of cost recovery between entities *and*
- Rights of private practice, including into which Number 1 Account the private practice revenue of the staff specialist will be paid.

## **9 LIST OF ATTACHMENTS**

1. Pro Forma Letter of Appointment (not applicable for staff specialist pathologists).



Attachment 1

<<Name of Unit >>  
<<LHD >>  
<<Postal Address for recruitment paperwork to  
be returned>>  
<<Unit Contact number for Unit recruitment  
paperwork to be returned>>  
<<Unit Facsimile for recruitment paperwork to  
be returned>>  
<<Unit Email address>>

Reference <<LHD Document reference>>

<<Date>>

<<Title>> <<First Name>> <<Surname>>  
<<Address>>  
<<Suburb>> << State>> <<Country>> <<Postcode>>

Dear <<Title>> <<Surname>>

I am writing with regards to the agreement which exists between the <<parent PHO>> and the <<receiving PHO>> for services to be provided by staff specialists of the <<parent PHO>> to the <<receiving PHO>>.

In order to facilitate the provision of these services and for you to be appropriately credentialed to work in the <<receiving PHO>>, it is NSW Health policy for you to be appointed as a visiting practitioner by the <<receiving PHO>> while you are employed as a staff specialist at the <<parent PHO>> and required, either actually or potentially, to provide services at the <<receiving PHO>>. The appointment as a visiting practitioner will be terminated when these conditions do not apply.

The Chief Executive of the <<receiving PHO>> has approved the recommendations of the Medical and Dental Appointments Advisory Committee of that public health organisation that you be granted the clinical privileges/scope of clinical practice attached as Schedule 1. Your clinical privileges/scope of clinical practice may be varied from time to time by the <<receiving PHO>>.

However, other than in terms of credentialing and determining your clinical privileges/scope of clinical practice, at all times when providing services at the <<receiving PHO>>, you will be doing so as part of your employment with the <<parent PHO>>. Hence, your employment will be managed by the <<parent PHO>> and governed by the Staff Specialist (State) Award and by the Staff Specialist Determination as varied from time to time. The provision of services under this arrangement does not constitute outside practice within the meaning of the Staff Specialist (State) Award.

Your reporting arrangements will remain unchanged, although for day to day matters at the <<receiving PHO>>, you will report to <<Position>>.

Your election of a right of private practice level arrangement in accordance with the Staff Specialist Determination will cover your employment at both facilities. You are required to ensure that all billable services provided to private inpatients and privately referred non-inpatients at the <<receiving PHO>> are billed by the <<parent PHO>> acting as your agent, consistent with the provisions of the Staff Specialists Determination.

Your Treasury Managed Fund indemnity cover will be provided as part of your employment with the <<parent PHO>>, and hence coverage will be coextensive with that applying at the <<parent PHO>> (which is dependent on the level of private practice elected and any applicable contract of liability coverage which you have concluded for paediatric and rural patients).

Your work at the <<receiving PHO>> should be in accordance with the following principles:

1. Compliance with all applicable public health organisation and local hospital policies and protocols, and with applicable Policy Directives and Guidelines issued by the Ministry of Health, as amended and as in force from time to time, including the NSW Health Code of Conduct
2. Ensuring that all services provided to patients are consistent with any instructions issued by the local supervisor or manager at the <<receiving PHO>>, however so named
3. Maintenance of adequate hospital clinical records, including completion, within a reasonable time period following the patient's discharge, of patient discharge letters;
4. Observance of general conditions of clinical practice applicable at the <<receiving PHO>>
5. Demonstrating at all times courteous and professional behaviour towards patients, their family and visitors, and other staff.

Prior to commencing work at the <<receiving PHO>> you may be required to provide documents to support the 100 point ID check in order to confirm your identity. Otherwise, your pre-employment checks from the <<parent PHO>> will continue to apply.

Your performance agreement pursuant to the Staff Specialists (State) Award will be concluded with the <<parent PHO>>.

You will need to obtain a Medicare Provider Number for each site at which you work.

In order to confirm your visiting practitioner appointment at the <<receiving PHO>>, please sign and return the attached acknowledgement of appointment to the <<parent PHO >>, which will forward a copy to the <<receiving PHO>>.

<<Signatory's name>>.

<<parent PHO>>

for Chief Executive, <<parent PHO>>.

**Schedule 1-** Approved Clinical Privileges / Scope of Clinical Practice for <<receiving PHO>>— by facility

## **ACKNOWLEDGEMENT OF VISITING PRACTITIONER APPOINTMENT**

Chief Executive  
<<parent PHO>>

I acknowledge my appointment as visiting practitioner at the <<receiving PHO>>.

I understand that in providing services at the <<receiving PHO>> I will be doing so as part of my employment with the <<parent PHO>>, and be subject to the applicable policies and protocols applying to me as an employee, and to any directions received from the <<parent PHO>>. I understand that where there is delegation of employment functions to the receiving PHO for day to day management purposes, such as for leave approval, I will be subject to instructions from the receiving PHO.

I also acknowledge that I am required to comply with all applicable public health organisation and local hospital policies and protocols in place when at the receiving PHO.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Printed Name: <<Title>> <<First Name>> <<Surname>>