Staff Specialist Emergency Physicians - Remuneration Arrangements for the Period to June 2017

Summary: The Policy Directive sets out the remuneration arrangements that are to apply to staff specialist emergency physicians.

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Audience: Medical staff; HealthShare NSW; Human Resources

Secretary, NSW Health
This Policy Directive may be varied, withdrawn or replaced at any time.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.
Policy Directive

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Status Active

Director-General

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Policies and Guidelines

STAFF SPECIALIST EMERGENCY PHYSICIANS - REMUNERATION ARRANGEMENTS FOR THE PERIOD TO JUNE 2017

PURPOSE
This Policy Directive sets out the remuneration arrangements that are to apply to staff specialist emergency physicians. These arrangements are in addition to the terms and conditions of employment of staff specialists generally, which are set out in the Staff Specialists (State) Award and the Staff Specialists Determination.

MANDATORY REQUIREMENTS
Staff specialist emergency physicians are eligible for enhanced remuneration involving the payment of an allowance in return for active participation in the initiatives set out in section 3 of the attached document, or for undertaking staff specialist emergency physician special service, as described at section 4 of the attached document.

The finite nature of the remuneration arrangements set out in this Policy Directive must be made explicit in all offers of employment as a staff specialist emergency physician made during the period covered by the policy.

IMPLEMENTATION

Chief Executives
Chief Executives must ensure that:

- The arrangements set out in this Policy Directive are communicated to all emergency physicians and other relevant medical administration and HR staff
- No other remuneration arrangements apply to staff specialist emergency physicians without the written approval of the Secretary of the NSW Ministry of Health or authorised delegate.

Directors of Emergency Departments
Directors of Emergency Departments must ensure that:

- There is full compliance with the terms and conditions of this Policy Directive
- They verify and, if there has been compliance, provide written certification in the form at Attachment 2 that the conditions for the payment of the 25% allowance to staff specialist emergency physicians, as provided for in this Policy Directive, have been met by the emergency physicians in their Department over the relevant six monthly period for which payment is being made.

Staff Specialist Emergency Physicians
Staff Specialist emergency physicians must ensure that they:
- Co-operate with public health organisation management in implementing the arrangements set out in this Policy Directive
- Do not accept payment of an allowance unless they comply with the terms and conditions specified in this Policy Directive for the payment of the allowance.

**REVISION HISTORY**

<table>
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<tr>
<th>Version</th>
<th>Approved by</th>
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<tr>
<td>February 2016</td>
<td>Deputy Secretary, Governance, Workforce and Corporate</td>
<td>Rescinds PD2015_031. Extension of current remuneration arrangements until June 2017 with introduction of standard allowance application form.</td>
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<tr>
<td>June 2015</td>
<td>Deputy Secretary, Governance, Workforce and Corporate</td>
<td>Rescinds PD2015_006. Sets out remuneration arrangements for staff specialist emergency physicians.</td>
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<tr>
<td>December 2014</td>
<td>Deputy Secretary, Governance, Workforce and Corporate</td>
<td>Rescinds PD2012_045. Sets out remuneration arrangements for staff specialist emergency physicians.</td>
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<tr>
<td>July 2012</td>
<td>Deputy Director General, Governance, Workforce and Corporate</td>
<td>Rescinds PD2009_041. Sets out remuneration arrangements for staff specialist emergency physicians.</td>
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<tr>
<td>July 2009</td>
<td>Deputy Director General, Health System Support</td>
<td>Rescinded PD2007_090. Set out remuneration arrangements for staff specialist emergency physicians.</td>
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<tr>
<td>December 2007</td>
<td>Deputy Director General, Health System Support</td>
<td>Introduced the procedures for eligibility and implementation of an allowance for emergency physicians electing to undertake special service.</td>
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**ATTACHMENTS**

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1 TERM

The allowance payable to staff specialist emergency physicians is payable in relation to services provided in the period ending on 30 June 2017.

2 SPECIAL STAFF SPECIALIST EMERGENCY PHYSICIAN ALLOWANCE

The enhanced remuneration arrangements set out in this Policy Directive only apply where a staff specialist emergency physician has elected a Level 1 arrangement under the rights of private practice arrangements provided for in the Staff Specialists Determination 2015. These arrangements are in addition to the existing Level 1 staff specialist remuneration and associated arrangements, which involve:

- The payment of a 20% private practice allowance (in addition to the applicable award remuneration plus special 17.4% on call/recall allowance)
- The payment of TESL and provision of TMF indemnity by the employer.

The enhanced remuneration arrangements involve an annual 25% allowance in addition to the remuneration and benefits referred to at paragraph 2.1 above. The 25% allowance is to be calculated based on the award salary, the 17.4% on call/recall allowance and the Level 1 private practice allowance, and paid at six month intervals in arrears in respect of the periods ending 30 June and 31 December. The allowance will bring the remuneration of a staff specialist emergency physician to the same level as the maximum remuneration applicable to a staff specialist at the relevant step in the staff specialists' remuneration scale, who has elected a Level 4 right of private practice arrangement. The allowance is payable on a pro rata basis for part time employees.

The allowance will be included as salary for all purposes, including the calculation of superannuation entitlements.

3 ELIGIBILITY FOR THE ALLOWANCE

The allowance will be payable upon written confirmation satisfactory to the Chief Executive:

(a) By the relevant Director of the Emergency Department in respect of each emergency physician in that Department, and

(b) By the General Manager or Director of Medical Services (or the holder of an analogous position) at the relevant facility in respect of each Director of an Emergency Department.

Certifying that there has been compliance with the conditions of the payment over the period for which payment is being made.
The conditions for payment of the allowance to staff specialist emergency physicians are as set out below.

(i) Participation in rostering arrangements that enable rostered attendance over seven days a week for clinical and clinical support duties that are consistent with Emergency Department patient presentation flows, and with appropriate regard to workforce sustainability.

(ii) Participation in rostering arrangements that provide regular rostering over more than one facility where reasonably required by the relevant public health organisation, having regard to the factors referred to in clause 14(b)(iii) of the Staff Specialists (State) Award.

(iii) Active support for approved reforms and initiatives relevant to Emergency Departments, including, but not limited to:
   (a) Changes necessary to achieve the National Emergency Access Target, and the introduction of Activity Based Funding
   (b) The implementation of changes arising from the NSW Health Emergency Department Models of Care Review 2012
   (c) In consultation with emergency physician staff, the implementation of emerging new models of care including Emergency Department Senior Assessment and Streaming
   (d) Role modelling and supervising junior medical staff in such new and changed models of care.

(iv) Active engagement in the implementation of any NSW Health approved quality programs or frameworks for Emergency Departments.

(v) Provision of at least three hours per week of non-clinical time (pro rata for part time employees) to teaching programs available to non-specialist medical and multi-disciplinary staff run by NSW Health and other professional bodies, such as the Hospital Skills Program and other programs of the Health Education and Training Institute. As an alternative to some or all of the teaching time referred to above, the undertaking of additional clinical activities at a commensurate level can be negotiated with the Director of the relevant Emergency Department or by the General Manager or Director of Medical Services (or the holder of an analogous position) at the relevant facility.

(vi) Co-operation in utilising emergency physician skills and competencies in other critical care areas, where this is beneficial to the provision of public hospital services and improves workforce sustainability.

(vii) A standard form for use in establishing eligibility for payment of the allowance is attached. Please note that the form requires satisfactory supporting documentation to be provided.
4 SPECIAL SERVICE ALLOWANCE FOR STAFF SPECIALIST EMERGENCY PHYSICIANS

As an alternative to the remuneration arrangements set out in Sections 2 and 3 above, emergency physician special service arrangements will continue in place. The provision of special service will be regarded as constituting compliance with paragraphs 3.2 (i), (ii) and (v) above.

Where a staff specialist emergency physician, in addition to complying with the remaining conditions set out at paragraph 3.2 above:

- Is rostered to work normal duties at his or her principal work location(s) over five days per week with a minimum shift length of six hours
- Provides at least 15 clinical shifts a year, 10 of which may involve an overnight stay, at an Emergency Department in a hospital that has been designated by the Ministry as a special service facility (unless their principal work location is at a special service facility).

A 25% special service allowance is payable fortnightly (instead of the six monthly allowance as provided for at paragraph 2.2 above). The fortnightly allowance is payable on a pro rata basis for part time employees, noting that the minimum length of a qualifying shift must be six hours. The allowance is not to be taken into consideration for the calculation of penalty rates.

Where the special service clinical shifts referred to at Paragraph 4.2 are being provided at a location other than the principal work location of an emergency physician, any travel and accommodation costs incurred will be paid for or reimbursed by the public health organisation at which the emergency physician is primarily engaged. The local health district can claim reimbursement of any such expenses from the local health district at which the special service shifts were provided.
APPLICATION FOR STAFF SPECIALIST EMERGENCY PHYSICIAN ALLOWANCE
(as provided for in Policy Directive PD2016_006)

| Name of Emergency Physician: ____________________________ |
| Hospital(s): ____________________________________________ |
| FTE: ___________________________________________________ |
| Period of which the Allowance is claimed: ________________ |

Each of the following criteria must be addressed:

The conditions for payment of the allowance to staff specialist emergency physicians are as set out below:

(i) Participation in rostering arrangements that enable rostered attendance over 7 days a week for clinical and clinical support duties that are consistent with Emergency Department patient presentation flows, and with appropriate regard to workforce sustainability.

(ii) Participation in rostering arrangements that provide regular rostering over more than one facility where reasonably required by the relevant public health organisation, having regard to the factors referred to in clause 14(b)(iii) of the Staff Specialist (State) Award.

(iii) Active support for approved reforms and initiatives relevant to Emergency Departments, including, but not limited to:

(a) changes necessary to achieve the National Emergency Access Target, and the introduction of Activity Based Funding;

(b) the implementation of changes arising from the NSW Health Emergency Department Models of Care Review 2012;

(c) in consultation with emergency physician staff, the implementation of emerging new models of care including Emergency Department Senior Assessment and Streaming;

(d) role modelling and supervising junior medical staff in such new and changed models of care.

(iv) Active engagement in the implementation of any NSW Health approved quality programs or frameworks for Emergency Departments.
(v) Provision of at least three hours per week of non-clinical time (pro rata for part time employees) to teaching programs available to non-specialist medical and multi-disciplinary staff run by NSW Health and other professional bodies, such as the Hospital Skills Program and other programs of the Health Education and Training Institute. As an alternative to some or all of the teaching time referred to above, the undertaking of additional clinical activities at a commensurate level can be negotiated with the Director of the relevant Emergency Department or by the General Manager or Director of Medical Services (or the holder of an analogous position) at the relevant facility.

(vi) Co-operation in utilising emergency physician skills and competencies in other critical care areas, where this is beneficial to the provision of public hospital services and improves workforce sustainability.

- Application will not be processed unless satisfactory supporting documentation and all required signatures are provided
- Allowance only applies where a staff specialist emergency physician has elected a Level 1 arrangement under the rights of private practice arrangements as provided for in the Staff Specialists Determination 2015 and is receiving standard remuneration arrangements.

**DECLARATION**

I, Dr _______________________________ confirm that the evidence provided meets the criteria required above.

Signed: _______________________________ Date: ______________________

**Recommended for payment of the Allowance:**

Signed: _______________________________ Date: ______________________

Director Emergency Department, ________________________ Hospital

**Approval to pay:**

Signed: _______________________________ Date: ______________________

General Manager / Director of Medical Services, ________________________ Hospital