

Country Health SA Rural General Practitioner Fee for Service Agreement EMERGENCY ON CALL ROSTER

The purpose of this fact sheet is to provide Contracted Medical Practitioners (CMP) and Cluster Directors (CD) with an overview and set of principles for managing vacancies that exist or may occur in the Emergency roster.

Country Health SA (CHSA) is required to have an emergency service at all hospitals on a 24 hour, 365 day basis.

Schedule 3 to 'The Country Health SA Rural General Practitioner Fee for Service Agreement' enables agreement to be reached between CHSA and the resident GPs to ensure planned cover for 365 days.

Planned absences of Nominated Medical Practitioner (NMP):

This would include a solo doctor taking 6 weeks planned absence.

In this circumstance, the relieving locum doctor should participate in the roster commitment as defined in Schedule 3 of the Agreement.

RDWA locums:

Current contractual arrangements require that CHSA pay RDWA direct for participation of the locum in the emergency roster.

Non RDWA sourced locums:

The CMP nominated in Schedule 1 of the Agreement is responsible for remuneration of the locum for participation in the emergency roster.

Scheduled gaps in the roster:

This includes a permanent or extended reduction in doctors to participate in the emergency roster (eg an unfilled vacancy).

In this circumstance, consultation will occur with the remaining resident doctors with

CHSA having responsibility in how the regular gaps in the emergency roster are to be filled. Interim cover may be achieved by the remaining participants agreeing to an increased commitment to the emergency roster or some other cover arrangements being made. An example of the latter might be that weekend cover is provided on a one in six basis covered by an attending locum or doctor remotely located.

Remuneration of the support on call arrangement is a shared responsibility that is to be considered on a case by case basis and worked through by CHSA and the CMP. An example scenario could include the CMP engaging a locum who in turns works during the day within the medical practice.

Unplanned absences of rostered NMP:

This would include a NMP being sick and unable to participate in the emergency roster at short notice.

In this circumstance, the CD (or delegate) will work with the resident doctors to check on acute availability and cover. If not feasible, CHSA will consider arranging a locum doctor or use of a combination of nursing staff and or paramedic with remote doctor support with transfer to adjacent hospitals or retrieval as clinically indicated.

Remuneration for this type of emergency support is the responsibility of CHSA.





For more information

SARGPA Management Team
Level 12, 100 Waymouth Street
ADELAIDE SA 5000
GPagreement@health.sa.gov.au

