

19 February 2010

Dear Rural Doctor

On 15th February 2010 Country Health SA confirmed in writing the Governments offer to rural GPs for a Contract to provide medical services as VMOs in rural hospitals and their role and responsibilities as well as CHSA's responsibilities.

As you would be aware over the last eleven months RDASA and the AMA negotiators have been working with Country Health SA and the Department of Health to develop a Contract Agreement and documentation to support this. Including SARMFA -a remuneration document and SARMER to clearly outline the responsibilities for doctors providing services as well as Country Health SA's responsibility in providing facilities and equipment in rural hospitals.

During the last year RDASA Executives have held many teleconferences with its regional representatives, attended Division meetings, obtained feedback from online surveys, received many emails and correspondence from members and discussed personally with many rural doctors what have been the key issues for an Agreement and remuneration package.

The RDASA negotiating team feel that the offer that has currently been presented to rural doctors is an acceptable one especially in regards to the on-call payments and taking into account a number of changes that CHSA have made in response to significant concerns from RDASA and its rural doctor membership.

The original proposal in December 2009 suggested there should be a tiered system of payments depending on the size of the towns and this has now been abolished.

There has been a significant increase from \$67,000 per year for on-call payment to \$135,000 per on-call payment. The Weekday rate is \$220/24 hours and \$550/24 hours for Friday to Sunday and Public Holidays backdated to 1st January 2010.

RDASA believes that this is a significant improvement in remuneration for rural doctors providing these essential on call services. RDASA negotiators believe the current offer with equitable payments to all rural doctors irrespective of size of town is the best overall compromise and reflects the

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clear will of members for on call payments to be even across all size health units.

The AMA has informed CHSA and its members that the AMA feels this offer is inadequate and wishes it increased by a further \$10,000 per roster.

Feedback from members and RDASA Executive to the RDASA negotiators was that they did not want the revised CHSA Agreement or its back dating put at risk by requesting a further small increase (especially in view of the forthcoming State election and possible delay in Cabinet approval).

There have been a number of issues that RDASA has concerns about and CHSA has agreed to further discussion in the next eighteen months. This is reflected in RDASA requesting that that the time for the Contract Agreement is only until 1 November 2011.

The issues for discussion include but are not limited to:

1. Appropriate remuneration for attending policy, quality and safety audit meetings.
2. Information technology and information management supports for country hospital and IT links with practices.
3. Telephone and video conferencing remuneration.
4. Provision of safe work hours conditions for rural doctors

The RDASA will also be working with Country Health SA to provide new supports for those doctors who work in towns without hospitals. The new grant arrangements for these practices will be finalised by early April which will support those doctors providing emergency services in these towns.

The RDASA Executive has had widespread support from many of its members in as far as the current proposal has been reached and believes that RDASA members should consider accepting the proposed offer.

Our understanding is that Country Health SA will be providing a formal letter to all rural GPs early next week with further information in regards to the Contract Agreement and also the timing of the contracts arriving at practices and hospitals for doctors to consider.

The RDASA negotiators and Executive believe that the current offer even though there are some short comings should be accepted by rural doctors.

Please provide any feedback back to Graham Morris and/or Peter Rischbieth.

Yours sincerely

 Handwritten signature of Peter Rischbieth in black ink.

Peter Rischbieth
Vice President Industrial

 Handwritten signature of Graham Morris in black ink.

Graham Morris
President