



2021 LHN CONTRACT NEGOTIATIONS

MEMBER UPDATE No.11 RSS SAYS WE ARE UNREALISTIC

[30 August 2021]

Welcome to the eleventh (11th) edition of this *Member Update*.

We continue to generate broad Media interest favourable to your cause. Read our most recent Media Release [here](#).

LOCAL ADVOCACY TOOL KIT [CLICK HERE WE ARE ASKING GPs TO CONTINUE TO ADVOCATE](#). We appreciate your continued help to maintain momentum by using the tool kit. We hope to empower our communities to help advocate for rural health.

Read our letter attached to this email sent to RSS just before it emailed LHN staff responding again to our March reform offer. It is now 171 days since we lodged our reform offer in March (remembering this process began late 2020).

We recommend you ignore RSS request to agree to their 25 August position (see details below). We are united in rural like never before and the AMA(SA) and RDASA are committed to achieving an outcome that propels us into the future.

We are meeting State Health Minister Wade this week. We have briefed the Federal Minister for Health Hunt and Regional Health Minister Gillespie about the critical SA rural GP workforce shortages and that SA Health (RSS) and the SA Government are not near sufficiently supporting our objective for sustainable rural health workforce reform.

ISSUES OF GREAT CONCERN

1. Why this process of offer and counter offer was not commenced from the very beginning with rapid turn-around to achieve an outcome.
2. The RSS have bypassed the AMA and RDA leadership and our negotiating team presumably to negotiate directly with GPs.
3. The last offer was also sent to nursing and allied health staff with details of our remuneration package.
4. The 9% sessional rate increase only applies to a very small number of eligible proceduralists in about 6 hospitals. The very large majority would be subject to a far lower hourly attendance rate which is far from our March reform.
5. It is not acceptable to ask rural GPs to be more flexible or more reasonable or more realistic or wait any longer.
6. RSS want a new contract to create a foundation for change in 5 years time.

DETAIL ON RSS OFFER

It must be noted that the offers for 24 hour sessional payments are in relation to only those doctors who are providing on-call obstetric, anaesthetic, and surgery services, which only apply to doctors in six (6) country hospitals doing over 250 deliveries, or with high anaesthetic case loads. The current hourly attendance rate (for two (2) hour min. attendance) of between \$190 -\$220 an hour needs explanation from RSS. However, this rate is below the current FFS rate based on four (4) consult visits per hour and is less than the current metropolitan hospital VMO rates. The rate for attendance for quality & safety audit and the workforce planning meeting of \$190.00 per hour is well below the current rate of \$240.25.

We commit to continue to publish this *Member Update* regularly to ensure Members remain informed, maintain momentum and maintain public interest towards contract agreement. Look out for Edition No.12 of this *Member Update*.

Please feel free to distribute this *Member Update* and TOOL KIT link to interested colleagues and throughout your networks. The more everyone is informed, the stronger our mandate to achieve success.

If you are not a member, please consider joining, by visiting the [RDASA](#) and [AMA\(SA\)](#) websites.

To provide comment or feedback, or for more information, please contact:

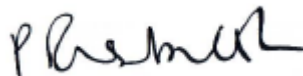
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- AMA(SA): Vice President: Dr John Williams (icwilliams1967@mac.com or president@amasa.org.au) or Chief Executive Officer: Dr Samantha Mead (CEO@amasa.org.au).

We look forward to providing further information and hearing your voices.

Yours sincerely



Dr John Williams
Vice President AMA(SA)



Dr Peter Rischbieth
President RDASA