



2021 LHN CONTRACT NEGOTIATIONS

MEMBER UPDATE No.12 MEETING WITH HEALTH MINISTER

7 September 2021

Welcome to the twelfth (12th) edition of this *Member Update*.

LOCAL ADVOCACY TOOL KIT [CLICK HERE](#). We appreciate GPs continued effort to maintain momentum by using the Tool Kit.

WE RECOMMEND YOU IGNORE THE RSS's EFFORT TO ENCOURAGE YOU TO SIGN UP FOR AN INADEQUATE GP CONTRACT OFFER

KEY RSS PROPOSALS (25 AUGUST)

The RSS 24 hour sessional payment proposal (which RSS emphasises as being of tremendous benefit) would only apply to doctors providing on-call obstetric, anaesthetic, and surgery services in one of the six country hospitals doing over 250 deliveries, or with high anaesthetic caseloads. So, for the vast majority, this proposal does not apply to you. **Most remain coupled to MBS.**

We do not clearly understand how the RSS's proposed \$190 - \$220 hourly attendance rate (two (2) hour min. attendance) would apply. However, the rate is **below the current FFS rate** based on four (4) consult visits per hour. Crucially, the rate is **less than the current metropolitan hospital VMO rates**. The rate for attendance for quality & safety audit and workforce planning meetings of \$190.00 per hour is well below the current rate of \$240.25. This makes it obvious that RSS has **no interest in encouraging clinical engagement** to improve services or to in any way incentivise working in a rural or remote area.

OUR ACTIONS ON YOUR BEHALF

It would now be clear to GPs that we are in this for the long haul and that we must continue to advocate for the reform changes vital for long term GP workforce sustainability.

On that basis, we met with state Health Minister Stephen Wade last Thursday (2nd September). We had asked RSS to not be present at that meeting, which was agreed. Minister Wade was receptive to our united stance but was under the impression negotiations were ongoing.

Our request to exclude RSS was made because we have lost confidence in RSS's fundamental capacity to resolve the situation whereby their offer had neglected many of the key issues which we feel are paramount to engage the GP workforce and attract new GPs to country practice.

RSS's decision to cancel a planned meeting and then send rural contracts directly to GPs and other staff means that talks with RSS have completely broken down. We are now working on correspondence to RSS that explains our objections by way of comparison with our March reform offer.

To the Minister, we:

- reinforced that we are committed to undoing the 15 years or more of neglect of rural health conditions;
- reinforced that we have the unprecedented, comprehensive backing of rural GPs across the state;
- explained that successive state governments, during previous contract discussions, had repeatedly ignored many of the key issues around retention, training and supporting rural supervisors and doctors in training;
- explained that maintaining the status quo was simply not enough and that the current country workforce plan is not working and needs more resourcing;
- explained the need to have a sustainable contract process brokered by your representative bodies; and
- explained that already, different LHNs had a number of very expensive workforce models where local GPs are excluded or are in such small numbers that fulfilling the full roster requirements is impossible to achieve safely.

We are now working on expanding our lobbying and stakeholder collaboration avenues. More on these issues and our reply correspondence to RSS in the next, 13th edition, of this *Update*).

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.13 of this *Member Update*.

Please feel free to distribute this *Member Update* and TOOL KIT 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:

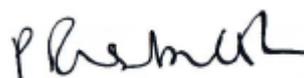
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We look forward to providing further information and hearing your voices.

Yours sincerely



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Vice President AMA(SA)



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