

CAMPAIGN 2009 – FOR SALARIED DOCTORS

Senior Doctor Claim Summary

C2009 AIMS:

- Improving your wages & conditions.
- Attracting & retaining salaried Doctors so Tasmania has the best public health care.
- Investing in teaching & training to deliver high quality & efficient patient outcomes.

How Does AMA Tasmania know what to claim?

- We engaged in 5 months of member consultation in Hospitals around the State.
- We conduct meetings with Doctors ongoing.
- We have a consultative team (of junior and senior doctors) advising our negotiating team (a professional industrial negotiator & a Senior Clinician).

1. SALARIES

- 1.1 Pay scale “nexus” calculation in current 2006 Agreement to be applied into the future.
- 1.2 30 June 2009 as the first Nexus calculation then 31 March thereafter.
- 1.3 Nexus data points to recognise new mainland automatic increments (Eg. Victorian Specialist automatic increment pay point is now year 9 and includes automatic ‘all purpose’ and ‘in lieu of private practice’ allowances).
- 1.4 Rationalisation of classification structure definitions to remove the 4 level structure & replace with the National standard of automatic progressions based on years of service.

2. PROFESSIONAL DEVELOPMENT

- 2.1. \$20,000 pa TERF paid as an automatic fortnightly allowance.

2.2. Agreement compliance to ensure 10 days professional development leave can be accumulated then accessed as 20 days over two years.

3. LOCUM COVER

3.1 Incumbent to be replaced by a qualified locum when any leave entitlement prevents incumbent availability OnCall.

3.2. When, after reasonable attempts, a Locum is shown to be unavailable, the Doctor providing the additional cover is to be paid at locum rates for the time provided.

4. PRIVATE PRACTICE

4.1 Minimum of 45% of “Base Salary” (as defined in the Private Practice Plan Agreement).

4.2 Right to private practice formally enshrined as an Agreement entitlement.

5. PAID MEAL BREAKS/SNACK PROVISION

5.1 Agreement compliance to ensure that where a doctor is unable to be relieved of all duty, the meal break time is not deducted from the time worked and is to be credited for payment.

5.2 Within easy access inside each hospital, provision of hot & cold drinks, bread, butter, cheese, spreads and biscuits. Where such supplies are not provided a meal allowance shall be paid.

6. CALLS WITHOUT CALLBACK

6.1 Payment of 15 minutes at the doctor’s hourly callback rate for each received hospital initiated call not resulting in a callback.

7. REASONABLE NOTICE OF ROSTER

- 7.1 Where a hospital fails to provide at least 4 weeks notice of a roster (excluding emergencies), the doctors affected will be paid an enforcement penalty of double time for all hours worked where notice has not been given.

8. WORKLOAD

- 8.1 Minimum 20 percent of paid time to be time dedicated to non clinical duties (i.e. teaching, administration, research). The Victorian 80:20 rule is claimed.
- 8.2 In light of increasing medical school numbers, establish a joint AMA / TSMPS / DHHS committee to review existing teaching arrangements and recommend ways in which the impact on Consultants can be ameliorated.

9. RECOGNITION OF INTERSTATE SERVICE

- 9.1 Long Service Leave accrued in an Australian public health system to be credited in Tasmania.

10. MEDICAL ENGAGEMENT

- 10.1 Formal processes to ensure senior doctors are engaged in hospital decision making.

11. LEAVE LOADING

- 11.1. 17.5% annual leave loading on a Doctors ordinary weekly pay.

12. LATE THEATRE PENALTIES

- 12.1 When theatres continue beyond 7pm, all time worked to be paid at call back rates.

13. CALL BACK RATES

- 13.1 When on call back duties after normal hours, the doctor shall be paid shall be paid an amount not less that that paid to a Visiting Medical Officer performing the same duties



14. MATERNITY/PARTNER LEAVE

14.1. 14 weeks paid maternity leave

14.2 1 week paid partner leave to be available at the time of the birth of a child

13. SAVINGS

13.1 All entitlements received by a doctor prior to the implementation of the proposed agreement, of a better standard to the provisions of the new agreement, will continue.