



Medical Superintendents with Right of Private Practice in Partnership – Role and Responsibilities

Human Resources Policy

Effective Date: May 2008

1 PURPOSE

To outline arrangements for Medical Superintendents with the Right of Private Practice (MSRPP) working in partnership with Medical Officers for the delivery of public health services.

2 APPLICATION

This policy applies to medical superintendents with right of private practice utilising medical officers in partnership for the delivery of public health services.

3 GUIDELINES

Guidelines may be developed to facilitate implementation of this policy. The guidelines must be consistent with this policy.

4 DELEGATION

The “delegate” is as listed in the Queensland Health Human Resource Delegations Manual and as amended from time to time.

5 REFERENCES

- Medical Superintendents with the Right of Private Practice and Medical Officers with Right of Private Practice – Queensland Public Hospitals Award – State 2003
- Medical Officers' (Queensland Health) Certified Agreement (No 1) 2005
- Medical Officer With Right of Private Practice - Principles for Identification of a MORPP Position HR Policy
- Medical Superintendents, Senior Medical Superintendents and Medical Officers With Rights of Private Practice – Terms and Conditions of Employment HR Policy
- MSRPP and MORPP - Time Free From Duty HR Policy

6 SUPERSEDES

- IRM 2.5-13 Role and Responsibilities – Medical Superintendents With Right of Private Practice in Partnership

7 POLICY

7.1 Role and Responsibilities

The following arrangements apply to Medical Superintendents with the Right of Private Practice, working in partnership with Medical Officers, for the delivery of public health services:

- Medical Officers (in partnership) will not be approved or appointed to provide assistance to the Medical Superintendent with Right of Private Practice for routine duties unless the District Health Service has an established position for a second Medical Officer.
- Medical Officers (in partnership) may provide normal weekend relief. However, Districts are required to ensure service status is established and medico-legal aspects are catered for. Medical Superintendent entitlements to days off and remuneration of the relieving Medical Officer are contained in the Weekend Relief – Medical HR policy.
- When a partner provides annual, long service or other extended leave relief, the Medical Officer may be appointed in an acting capacity, in accordance with normal procedures, with payment being made accordingly.
- The Medical Superintendent with Right of Private Practice is responsible for the routine patient care requirements and any suggestion that these duties be subjected to "job-sharing" is not supportable.
- District Managers may grant approval for a partner to provide some sharing of out-of-hours call arrangements provided that any periods beyond normal time-off entitlements of the Medical Superintendent are not subject to extra payment by the District.
- If in a particular instance, the public hospital workload reaches a level, which may be considered beyond the part-time duties and responsibilities of the Medical Superintendent with Right of Private Practice, Districts should consider converting the position to one of full-time status.
- Because of the medico-legal implications, District Health Services should ensure that a formal contract of service exists between themselves and the practising relieving Medical Officer.

8 HISTORY

May 2008	Developed as a result of the HR Policy Framework consolidation project.
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