

MEDICAL EXECUTIVE DIRECTORATE BUSINESS RULE – SESLHDBR/036

Name	Claiming a Payment of a Clinical Appraisal Remotely		
What it is	Junior Medical Officers required to work overtime after leaving the employer's premises to provide a technology support resolution or clinical appraisal remotely without onsite presence, shall be paid for such work at the appropriate overtime rate, with a minimum payment of one hour at such rates.		
Risk Rating	Low	Review Date	August 2023
What it is not	A clinical appraisal provided remotely pursuant to subclause (xi) (a) of Clause 12 On-Call and Call Back shall attract a minimum payment of one hour at the appropriate overtime rate only in circumstances where, if it had not been provided remotely, the on-call resident medical officer or registrar would have otherwise needed to have returned to the workplace. Any additional requirement to provide further clinical appraisal falling within the hour from which the initial clinical appraisal commenced shall not attract an additional payment. Any time worked beyond the expiration of one hour shall be paid at overtime rates. Time where work is not being performed will not be counted as time for purposes of overtime payment.		
Who it applies to	Junior Medical Officers claiming a payment of a Clinical Appraisal Remotely.		
When to use it	Where a medical officer is claiming a payment of a clinical appraisal remotely.		
How to use it	<p><u>Junior Medical Officers Claiming a Payment of a Clinical Appraisal Remotely:</u></p> <ol style="list-style-type: none"> 1. Enter the "remote recall" on the timesheet. 2. In addition complete the 'Medical Officer payment for Undertaking a Clinical Appraisal Remotely Application Form' in Appendix 1 and also under Medical Workforce section located on the SESLHD Forms Intranet page 3. Make an entry in the patient's medical record, as required under point (11) of the application form section "To be completed by the medical officer applying for payment", which confirms the "criteria" listed in the application form, including information which addresses point (iii) of the same section on the form. 4. Make a copy of the medical record entry and attach it to the application form. 5. Submit the application form to the relevant Medical Administrator – Director of Clinical Services, or the Chief Psychiatrist. 		

	<p><u>Approving Officers for the Payment of a Clinical Appraisal Remotely:</u></p> <p>Medical Administrator – Directors of Clinical Services / Chief Psychiatrist:</p> <ol style="list-style-type: none"> 1. Review the application form. 2. If approved, advise the relevant HealthRoster Entry Officer. 3. If disapproved, notify the Junior Medical Officer. 4. Maintain a record of claims. <p>Head of Department or Officer holding Delegation to approve JMO timesheets:</p> <ol style="list-style-type: none"> 1. Do NOT approve any claims for “remote recall” – only Medical Administrators – Directors of Clinical Services or the Chief Psychiatrists hold the Delegation to approve these claims. 2. Monitor claims submitted and review trends. <p>HealthRoster Entry Officers:</p> <ol style="list-style-type: none"> 1. Enter claims into Healthroster following approval by the Medical Administrator – Directors of Clinical Services or the Chief Psychiatrist.
Why the rule is necessary	To assist in the monitoring of those claiming this allowance to ensure inappropriate claiming does not occur.
Who is responsible	<ul style="list-style-type: none"> • Medical Administrators –Directors of Clinical Services • Chief Psychiatrist • Heads of Department • Officer holding Delegation to approve JMO timesheets.
Ministry of Health / SESLHD reference	Public Hospital Medical Officers Award – Clause 12 – On Call and Call Back Section (ix) (x) (xi) (a) 1 to 9 and 9 (b) 1 and 2 and (xii).
Author	Director Clinical Governance and Medical Services

Revision and Approval History

Date	Revision Number	Author and Approval
March 2014	1	Developed by Prof Ian Rewell, Director Medical Services. Approved by Sharon Litchfield, Director Workforce Services
July 2018	2	Directorate name amended to reflect current org structure. Name of payroll system updated.

August 2018	2	Processed by Executive Services – minor review approved by Executive Sponsor.
August 2020	3	Executive Sponsor updated from District Director Medical Services to Director Clinical Governance and Medical Services. Approved by Executive Sponsor and published by Executive Services.

Appendix 1 – Approval Form ‘Medical Officer Payment for Undertaking Clinical Appraisal Remotely Application Form’ (Please note that this form is mandated to be used by LHDs in the in the [NSW Ministry of Health Policy - PD2014 002 Payment to Medical Officers Undertaking a Clinical Appraisal Remotely](#)(Pages 5-7)

Attachment 1: Approval Form

MEDICAL OFFICER PAYMENT FOR UNDERTAKING CLINICAL APPRAISAL REMOTELY APPLICATION FORM

Facility:		Department:	
Family Name:		First Name:	
Employee Number:		Telephone No.	
Email Address:			
Clinical Appraisal Date:	Time Commenced:	Time Completed:	Total Time Spent in Undertaking the Appraisal (not including interruptions and time not spent on the appraisal):
Name of on-site Medical Practitioner who initiated the request for a clinical appraisal:			
Patient Name:		Patient Medical Record No (MRN):	
In the assessment of the patient's physical condition which led to the making of a diagnosis or a differential diagnosis away from the hospital all of the following criteria were met:			

Criteria	Requirement Completed ✓	Time Taken
Received call(s) or email(s) from a medical practitioner on duty in a hospital about a patient		
Received patient history including current medical condition, any relevant past medical history including previous surgery and use of medications if known		
Discussed with on duty medical practitioner the patient's current medical condition, asked questions in respect of the condition as necessary such that the information provided enabled an evaluation of the patient's physical condition		
Directed further examination to be conducted as clinically		

To be completed by the Medical Officer applying for payment:

I hereby certify that:

- I. The information provided in this application is accurate.
- II. I have updated the patient's record for the patient in respect of whom the appraisal was provided at the earliest opportunity and in a manner that ensures continuity of patient care.
- III. The medical practitioner who initiated the request for the appraisal confirmed to me that he or she sought to consult with any appropriate available medical staff on duty in the hospital and the reason for calling an on-call medical officer was as follows:
- IV. The reason why it was not necessary to return to the hospital to undertake the appraisal is as follows:

Signature of Medical Officer:	
Date:	

To be completed by the Director of Medical Services or other relevant medical administrator:

I hereby certify that:
the Medical Officer has complied with the terms and conditions as set out in the Policy Directive *Payment to Medical Officers for Undertaking a Clinical Appraisal Remotely* PD2013_056, and that payment at the appropriate overtime rate can be made.

Print Name:	
Title:	
Signature	
Date:	