

Protocol for JMO sick relief workforce redeployment (weekdays)

- 1) JMO informs relevant supervisor and Medical Administration of absence at earliest opportunity
- 2) Representative from Medical Administration to attend morning handover (this is usually the MESO or the JMO manager) and inform:
 - a. Senior Medical Registrar (SMR)
 - b. MAPU Advanced Trainee
- 3) Medical Administration representative also to provide current inpatient load analysis (ie patient lists) of the five General Medical Unit (GMU) teams, Cardiology team and Neurology team
- 4) SMR and/or MAPU AT to conduct handover as a business, rather than an educational, meeting to allow time to discuss workforce redeployment.
- 5) Workforce redeployment can include any of the following, in order of preference:
 - a. MAPU Advanced Trainee:
 - i. Redeployment of “supernumerary” MAPU registrar (Monday to Wednesdays only). The registrar redeployed to this role should have sufficient experience to function with minimal supervision and preferably have passed the RACP clinical examination.
 - ii. Contact the MAPU advanced trainee who is currently off duty to work the shift.
 - iii. Requesting the Senior Medical Registrar to assist.
 - iv. Requesting the MAPU registrar who is currently off nights to work the shift. The registrar redeployed to this role should have sufficient experience to function with minimal supervision and preferably have passed the RACP clinical examination (Thursdays to Sunday only).
 - v. Requesting cover from TCH.
 - b. Registrars:
 - i. Redeployment of “supernumerary” MAPU registrar (Monday to Wednesdays only).
 - ii. Requesting assistance from the GMU registrar with the least inpatient load (with the proviso they are not on-call or post-take on the day).
 - iii. Requesting the afternoon MAPU registrar to commence work earlier.
 - iv. Redeployment of the Senior Medical Registrar (usually only for covering Advanced Trainee positions).
 - v. Requesting cover from TCH.
 - c. Interns/RMOs
 - i. Redeployment of the GMU intern/RMO with the least inpatient load (with the proviso they are not on-call or post-take on the day).
 - ii. Redeployment of the subspecialty RMOs, if workload allows. There may be circumstances where only partial cover can be achieved.
 - iii. Redeployment of the MAPU JMOs, if workload allows. There may be circumstances where only partial cover can be achieved.
 - iv. Reallocation of surgical JMOs.
- 6) Once agreement from JMOs of proposed workforce redeployment has been secured, SMR is to inform the relevant Departmental Heads affected:
 - a. MAPU – Dr Tony Kwan (Director) and Dr Shaun Zhai (Co-Director)
 - b. Cardiology – Dr Peter Scott
 - c. Neurology – Dr Yash Gawarikar
 - d. Surgery – Dr Frank Piscioneri

- 7) Medical Administration to make amendments to both the composite and the back roster, notify switch and also raise at DOP.
- 8) Medical Administration to liaise with sick JMO to provide medical certificate and complete leave form at earliest convenience for leave processing.
- 9) Medical Administration to reflect within Kronos and to make appropriate adjustments to affected JMOs (ensure their on-call allowance is paid).

Protocol for JMO sick relief workforce redeployment (weekends)

- 1) JMO informs the MAPU Advanced trainee or the after-hours shift co-ordinator (in the case of the MAPU Advanced Trainee calling in sick) of absence at earliest opportunity. They should also notify Medical Administration via email of said absence.
- 2) MAPU AT to conduct handover as a business, rather than an educational, meeting to allow time to discuss workforce redeployment.
- 3) Workforce redeployment can include any of the following, in order of preference:
 - a. MAPU Advanced Trainee:
 - i. Contact the MAPU advanced trainee who is currently off duty to work the shift.
 - ii. If the above not possible, proceed as for registrar redeployment.
 - b. Registrars:
 - i. Cover with existing staffing, with priority for the MAPU admitting registrar then the GMU registrar.
 - ii. The supernumerary registrar for MAPU in the coming week may be utilised, with time in lieu taken during the coming week.
 - iii. Requesting the MAPU registrar who is currently off nights to work the shift, with time in lieu taken during the coming week.
 - iv. Requesting cover from TCH.
 - c. Interns/RMOs
 - i. If the morning RMO is sick, then the afternoon RMO gets called in to work the entire shift.
 - ii. If the afternoon RMO is sick, then the morning RMO is required to work the entire shift.
 - iii. Reallocation of surgical JMOs.
- 4) On Monday, Medical Administration to liaise with sick JMO to provide medical certificate and complete leave form at earliest convenience for leave processing.
- 5) Medical Administration to reflect within Kronos and to make appropriate adjustments to affected JMOs (ensure their on-call allowance is paid).