
QUALITY ESSENTIALS KIT

1. PRACTICE PROFILE

1. Practice Profile			
Practice Name			Id
<p>The Practice Profile allows GPA ACCREDITATION <i>plus</i> to receive background information about your Practice prior to preparing an audited report and organising your Practice survey visit.</p> <p>To assist in scheduling your Practice survey visit and providing relevant information to GPA surveyors, please complete the following. If you require more space for your comments, please write on an additional page and return with the <i>Quality Essentials Kit</i>.</p>			
Practice Details		Information provided by Practice	
Location (nearest major & closest intersection)			
Location zone (residential, commercial, eg Shopping Mall)			
Location and access to nearest chemist, hospital, specialist services, community health services and disability services			
Transport to practice (private vehicle, public transport route)			
Parking – location to practice and approximate number of spaces			
Disabled parking - location to practice and number of spaces			
Access provisions to building (disabled, prams, elderly)			
Practice facilities (number of consulting rooms, treatment rooms)			
Other Practice services			

Completed By: _____ Signature: _____ Date: _____

3. CHECKLISTS

The checklist documents enclosed cover essential information required to meet the current edition of the RACGP Standards for General Practices only.

3a. Practice Information Sheet			
Practice Name			Id
<p>Under the RACGP Standards for General Practices 3rd Edition, practices are required to have a comprehensive, current information sheet or brochure.</p> <p>Please review your information sheet for essential requirements and indicate below with a Y/N, the information contained on your practice information sheet / brochure.</p> <p>Please return a copy of this completed checklist along with your information sheet / brochure as part of the <i>Quality Essentials Kit</i>.</p>			
Standards Reference	Item	RACGP Page No.	Yes / No
1.2.1A	Names of all GPs working in the practice	16	
1.2.1A	Names of clinical / nursing staff (subject to their consent)	16	
1.2.1A	Practice address and phone number(s)	16	
1.2.1A	Practice's normal consulting hours	16	
1.2.1A 1.1.4C	Arrangements for care outside normal opening hours, including a contact telephone number	15 - 16	

Completed By: _____ Signature: _____ Date: _____

3b. Systems, Policies & Procedures

Practice Name		Id	
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The RACGP Standards for General Practices 3rd Edition require practices to have a number of documented systems, policies and procedures. The Practice Policy and Procedures Manual should be reviewed by the Practice at least annually or if significant changes occur to practice staffing, services or facilities.

Please return an electronic or hard copy of your manual with the following checklist as part of the *Quality Essentials Kit*.

Standards Reference	Description	RACGP Page Number	Your Manual Page Reference
1.1.1A✓	System: To accommodate patients with urgent, non-urgent, complex and planned chronic care, and preventive health needs	11	
1.1.1B✓	Procedure: To accommodate and identify longer consultations	11	
1.1.1C✓	Procedure: For triage	11	
1.1.1D✓	Policy: For dealing with urgent medical matters	11	
1.1.2A✓	Policy: On how the practice receives and returns telephone calls and if applicable, electronic messages from patients	12	
1.1.3C✓	Policy: On home visits within and outside opening hours	13	
1.1.4D✓	Policy: After Hours care arrangements	15	
1.2.1C✓	Policy: For the management of patient health information	16	
1.2.3A✓	Procedure: For communicating with patients who do not speak English as their primary language	18	
1.2.3B✓	Procedure: how to contact an interpreter service	18	
1.3.1D✓	Policy: On the provision of health promotion and preventive care that incorporates a reminder and recall system	22	
1.4.2C✓	Policy: On clinical autonomy for GPs	25	
1.5.1B✓	Policy: That encourages continuity of comprehensive care	26	
1.5.2A✓	Policy: That allows patients to request their preferred GP when making an appointment or attending our practice	27	
1.5.4✓	Policy, Procedures and Systems: For the follow up, recall and review of tests and results	29	

Standards Reference	Description	RACGP Page No.	Your Manual Reference
2.1.1√	Policy: For providing respectful and culturally appropriate care to patients	41	
2.1.2A√	Policy: That outlines the process for receiving and responding to feedback and complaints from patients and other people	43	
3.1.2A√	System: Clinical risk management to enhance the quality and safety of our patient care	47	
4.2.1E√	Policy: For the management of patient health information	58	
4.2.2D√	System: To ensure computer based patient health information is kept secure and confidential	60	
4.2.2E√	Procedure: For an information disaster recovery plan	60	
4.2.3E√	System: To ensure that electronic data transmission of patient health information over a public network is encrypted	62	
4.2.4√	System: For the retention of, and any destruction of, patient health information	63	
5.1.1J√	Policy: To ensure there is no smoking in our practice	66	
5.2.1D√	System: To ensure maintenance of clinical equipment	70	
5.3.1√	System: To ensure Schedule 8 medicines in our practice meets state legislation	72	
5.3.2C√	Policy and Procedures: For cold chain management	73	
5.3.3C√	Procedure: For checking expiry dates of perishable materials	74	
5.3.4E√	Policy: That outlines infection control procedures including: <ul style="list-style-type: none"> • Sharps injury management • Spills management • Hand Hygiene • Cleaning, disinfecting and decontamination of the Practice • Sterilisation of equipment • Storage and disposal of clinical waste • Standard • Additional precautions • Staff immunisation 	77	
5.3.4F√	Policy: That outlines the immunisation status of staff	77	

COMMENTS

Completed By: _____ Signature: _____ Date: _____

3c. Practice Documents to be Returned

Practice Name	Id	
<p>It is important that all the following documents are returned to GPA with the <i>Quality Essentials Kit</i> – this will enable your Quality Accreditation Manager to audit and provide feedback prior to your survey visit.</p> <p>Whenever possible documents should be sent via email or on CD ROM via post.</p> <p>PLEASE DO NOT send an original document to GPA – PLEASE send a photocopy of your information as we are unable to return.</p>		
Document	RACGP Reference	Documents Provided
Practice Information Sheet + completed checklist provided by GPA on page (3a)	Several	
Policy & Procedure Manual + completed checklist provided by GPA on pages (3b)	Several	
After hours practice roster (if applicable)	1.1.4A	
After hours formal written agreement with MDS, Hospital or other Medical Service	1.1.4A	
If above is MDS – MDS accreditation certificate	1.1.4A	
Practice fees sheet (if not on information sheet)	1.2.4	
Patient consent form to be part of national / state / territory reminder systems/registers (if used)	1.3.1E	
Evidence of regular clinical meeting	1.5.3B	
Qualifications / training / education program documentation including VR Evidence, QA&CPD or PDP Evidence, Medical Board Registration & CPR Training Evidence for all Doctors working in the practice	3.2.1	
Appropriate qualifications, current registration, training / education program documentation for clinical nurses and allied health professionals	3.2.2	
Training / education program documentation for administrative staff (appropriate to their role)	3.2.3	
Induction and / or orientation program form for all staff and GPs	4.1.1E / 5.3.4G	
Transfer of Medical Record form	4.2.3B	
Schedule 8 Log Book (copy of one recent page for one drug only)	5.3.1B	
Vaccine fridge temperature recordings (copy of one recent page / week)	5.3.2A	
Sterilisation validation	5.3.4	
Clinical waste collection and disposal contract	5.3.4	

3d. Documents to Have Ready For the Survey Visit

It is important that you have the following documents ready for the survey visit – this will assist with streamlining the survey visit for the surveyors as well as the Practice.

Where relevant, the appropriate staff need to be prepared to explain this documentation.

Document	RACGP Reference	Have Ready (✓)
Access appointment system	1.1.1A	
Medicare data	1.1.3A	
Health promotion information/ brochures, including services brochures	1.3.1A	
Staff meeting and clinical meeting minutes	1.5.3B 4.1.1G	
Local resource directory	1.6.1A	
Quality improvement activity information /practice population Data	3.1.1B	
Qualifications / training / education program documentation including VR Evidence and QA&CPD or PDP Evidence (refer to GPA Audit Form)	3.2.1 3.2.2 3.2.3	
Position statements / job descriptions for all staff	4.1.1F	
Staff immunisation status/record	5.3.4F	
Research approval statements	4.2.3D	
Computer encryption records	4.2.3E	
Medical student in practice sign	2.1.3C	
Administrative staff roster	4.1.2B	
A selection of medical records which show evidence of home or other visits, after hours care provided, and telephone or electronic consultations where clinically significant.	1.7.3A	

All the documents on the “Documents to be returned to GPA” Checklist should also be readily available for the survey visit.