



The Royal Australian
College of General
Practitioners

Standards for general practices 4th edition What's different?

Structure

- Same 5 sections and same number of Standards
- 3 less criteria and 38 less indicators.

References to legislation

In general, references to legislation have been removed in the RACGP *Standards for general practices* (4th edition) as federal, state/territory and local legislation override any non-legislative standards. On occasion, legislation is cited in the *Standards* where it is particularly important to a defined aspect of general practice eg Criterion 4.2.1 Confidentiality and privacy of health information.

Criteria and Indicators

- **Criterion 1.2.2 Informed patient decisions**

*Our practice gives patients sufficient information about the purpose, importance, benefits, risks **and possible costs** associated with proposed investigations, referrals or treatments to enable patients to make informed decisions about their health.*

Change - New emphasis on possible costs as a component of informed decision making; 4 indicators (3 flagged and 1 unflagged) reduced to 3 flagged indicators

- **Criterion 1.2.3 Interpreter **and other communication** services**

*Our practice provides for the communication needs of patients who are not proficient in the primary language of our clinical team **and/or who have a communication impairment.***

Change - new emphasis on patients with special needs

- **Criterion 1.2.4 Costs associated with care initiated by the practice**

Our practice informs patients about the potential for out-of-pocket expenses for health care provided within our practice and for referred services.

Change - combines 3rd edition criterion 1.2.4 costs within our practice and criterion 1.2.5 costs for referred services; 5 flagged indicators (total) reduced to no indicators

- **Criterion 1.3.1 Health promotion and preventive care**

*Our practice provides health promotion, illness prevention **and preventive care and a reminder system based on patient need** and best available evidence.*

Change - broader scope; 6 flagged indicators reduced to no indicators

- **Criterion 1.4.1 Consistent evidence based practice**

Our practice has a consistent approach for the diagnosis and management of conditions affecting patients in accordance with best available evidence.

Change - combines 3rd edition criterion 1.4.1 evidence based practice and criterion 1.5.3 consistent approach; 7 indicators (total) reduced to 4 flagged indicators

- **Criterion 1.5.1 Continuity of comprehensive care and the therapeutic relationship**

Our practice provides continuity of comprehensive care to patients.

Change - combines 3rd edition criterion 1.5.1 continuity of comprehensive care and criterion 1.5.2 continuity of the therapeutic relationship; 5 flagged indicators (total) reduced to 2 flagged indicators

- **Criterion 1.5.2 Clinical handover (new)**

Our practice has an effective clinical handover system that ensures safe and continuing health care delivery for patients.

Change - new criterion; 1 flagged indicator

- **Criterion 1.7.1 Patient health records**

Change - refined definitions of 'active patient' and 'active patient health record'; new flagged requirement for practices with hybrid medical record systems to record in both systems the location of clinical notes for each consultation; new flagged requirement to record the person the patient wishes to be contacted in an emergency; new flagged requirement to record Indigenous status (with information collected via a standard question); new unflagged requirement for working toward the recording of other cultural backgrounds; 4 flagged indicators increased to 6 flagged indicators

- **Criterion 1.7.2 Health summaries**

Change – flagged requirement for active patient health records to contain a health summary increased from 50% to 75% of active patient health records; new unflagged requirement on the use of standardised clinical terminology (such as coding) to enable data collection for the review of clinical practice; 4 flagged indicators reduced to 2 flagged indicators and 1 unflagged indicator

- **Criterion 2.1.2 Patient feedback**

Our practice seeks and responds to patients' feedback on their experience of our practice to support our quality improvement activities.

Change – new emphasis on collecting patients' feedback on their *experience* of a general practice and using the data to drive quality improvement; new flagged requirement for practices to use a validated questionnaire approved by RACGP or practice-specific methods approved by RACGP to collect patient feedback; new unflagged requirement to inform patients about practice improvements; new RACGP guide: *Learning from our patients*.

- **Criterion 3.1.1 Quality improvement activities**

*Our practice **participates in** quality improvement activities.*

Change – stronger emphasis on active whole-of-practice engagement in quality improvement; 2 indicators (1 flagged and 1 unflagged) now 2 flagged indicators

- **Criterion 3.1.2 Clinical risk management systems**

*Our practice has clinical risk management systems **s** to enhance the quality and safety of our patient care.*

Change – broader focus on multiple systems; 2 indicators (1 flagged and 1 unflagged) increased to 5 flagged indicators; 3 new flagged indicators cover deviations from standard clinical practice, implementation of improvements, contingency plan for adverse events

- **Criterion 3.1.3 Clinical governance (new)**

Our practice has clear lines of accountability and responsibility for encouraging improvement in safety and quality of clinical care.

Change – new criterion with 2 flagged indicators requiring leaders with designated areas of responsibility and the internal sharing of information about safety and quality improvement

- **Criterion 3.1.4 Patient identification (new)**

Our patients are correctly identified, at each encounter with our practice team.

Change – new criterion with 1 flagged indicator requiring a patient identification process using three approved patient identifiers

- **Criterion 3.2.1 Qualifications of general practitioners**

Change – unflagged indicator on CPR training now flagged

- **Criterion 3.2.2 Qualifications of clinical staff other than medical practitioners**

Change – more emphasis on multidisciplinary clinical team; unflagged indicator on CPR training now flagged

- **Criterion 3.2.3 Training of administrative staff**

Change – more specific focus on training relevant to a role; 3 indicators (2 flagged and 1 unflagged) reduced to 2 flagged indicators; CPR training now flagged

- **Criterion 4.2.1 Confidentiality and privacy of health information**

Our practice collects and safeguards the confidentiality and privacy of personal health information in accordance with National Privacy Principles.

Change – combines 3rd edition criterion 4.2.1 confidentiality and privacy of health information and criterion 4.2.3 transfer of patient health information; direct reference to legislated National Privacy Principles; total of 10 flagged indicators reduced to 8 flagged indicators

- **Criterion 4.2.2 Information security**

Change – combines 3rd edition criterion 4.2.2 information security and criterion 4.2.4 retention and destruction of patient health information; total of 8 flagged indicators reduced to 7 flagged indicators; new flagged requirement for a designated staff member with primary responsibility for electronic systems and computer security

- **Criterion 5.1.1 Practice facilities**

Change – 12 indicators (10 flagged and 2 unflagged) reduced to 8 indicators (7 flagged and 1 unflagged); **new flagged requirement for one or more height adjustable beds per practice**

- **Criterion 5.2.1 Practice equipment**

Change – 4 flagged indicators increased to 5 indicators (4 flagged and 1 unflagged); new unflagged requirement for practices to have a pulse oximeter

- **Criterion 5.3.1 Safe and quality use of medicines (new)**

Our clinical team prescribes, dispenses and administers appropriate medicines safely to informed patients.

Change – new criterion replacing 3rd edition 5.3.1 Schedule 8 medicines and 5.3.3 perishable materials; 4 flagged indicators covering information for patients, access to current information on medicines, accurate medicines lists, and the acquisition, storage, administration, supply and disposal of medicines

- **Criterion 5.3.3 Health Care associated infections**

Our practice has systems that minimise the risk of health care associated infections.

Change – replaces 3rd edition criterion 5.3.4 infection control; new focus on preventing health care associated infections; 7 flagged indicators increased to 9 flagged indicators; new flagged requirement for general practices to designate a person with primary responsibility for co-ordinating infection control processes; new flagged requirement for the practice to be visibly clean; expanded requirement for ongoing staff education; new flagged requirement for patient education on the transmission of communicable diseases

Education sessions

In the coming months, the RACGP will be running education sessions on the *Standards* 4th edition. Watch out for specific details on the RACGP website www.racgp.org.au

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