Supplementary Material

Highlighting efficiency and redundancy in the Royal Australian College of General Practice standards for accreditation

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Table S1.

Individual indicator conformity rate by general practices assessed at the site visit.

Code	Indicator Description	M	Practices assessed (N)	MET (N)	MET (%)
C1-1a	Our patients can access up-to-date information about the practice.	1	757	601	79.4%
C1-2a	Our practice manages communications from patients.	1	756	739	97.8%
C1-3a	Our patients receive information about proposed investigations, referrals and treatments, including their purpose, importance, benefits, and risks.	1	756	755	99.9%
C1-3b	Our patients receive information to support the diagnosis, treatment, and management of their conditions.	1	756	740	97.9%
C1-4a	Our practice endeavours to use an interpreter with patients who do not speak the primary language of our practice team.	1	756	749	99.1%
C1-4b	Our practice endeavours to use appropriate communication services to communicate with patients who have a communication impairment.	1	756	744	98.4%
C1-4c	Our patients can access resources that are culturally appropriate, translated, and/or in plain English.	0	756	755	99.90%
C1-5a	Our patients are informed about out-of-pocket costs for healthcare they receive at our practice.	1	757	757	100%
C1-5b	Our patients are informed that there are potential out-of-pocket costs for referred services.	1	756	756	100%
C2-1a	Our practice, in providing patient healthcare, considers patients' rights, beliefs, and their religious and cultural backgrounds.	1	756	756	100%
C2-1b	Our patients receive information from the clinical team about the risks resulting from refusing a specific treatment, advice, or procedure.	1	756	749	99.1%
C2-1c	Our practice acknowledges a patient's right to seek other clinical opinions.	1	755	754	99.9%
C2-1d	Our patients in distress are provided with privacy.	1	757	757	100%
C2-1e	Our clinical team considers ethical dilemmas.	1	757	607	80.2%
C2-2a	Our practice obtains and documents the prior consent of a patient when the practice introduces a third party to the consultation.	1	756	737	97.5%
C2-3a	Our patients with disabilities or impairment can access our services.	1	757	751	99.2%
C3-1a	Our practice plans and sets goals aimed at improving our services.	1	756	682	90.2%
C3-1b	Our practice evaluates its progress towards achieving its goals.	0	756	665	88.0%
C3-1c	Our practice has a business risk management system that identifies, monitors, and mitigates risks in the practice.	1	756	667	88.2%
C3-1d	Our practice has a complaints resolution process.	1	756	738	97.6%
C3-2a	All members of our practice team understand their role in the practice.	1	756	744	98.4%
C3-2b	Our practice has performance discussions with each team member.	1	755	686	90.9%
C3-2c	Our practice inducts new members of the practice team and familiarises them with our systems and processes.	1	756	737	97.5%
C3-2d	Our practice has at least one team member who has the primary responsibility for leading risk management systems and processes.	1	756	712	94.2%
C3-2e	Our practice has at least one team member who coordinates the resolution of complaints.	1	756	730	96.6%
C3-3a	Our practice has an emergency response plan for unexpected events, such as natural disasters, pandemic diseases, or unplanned absences of clinical team members.	1	757	694	91.7%

C3-4a	Our practice team has the opportunity to discuss administrative matters with the principal practitioners, practice	1	756	745	98.5%
	directors, practice management, or owners when necessary.	1			
C3-4b	Our practice encourages involvement and input from all members of the practice team.	1	756	751	99.3%
C3-4c	Our clinical team discusses the practice's clinical issues and support systems.	1	754	742	98.4%
C3-5a	Our practice supports the safety, health, and wellbeing of the practice team.	1	756	742	98.2%
C3-5b	Our practice team is encouraged to obtain immunisations recommended by the current edition of the Australian immunisation handbook based on their duties and immunisation status.	1	756	735	97.2%
C3-6a	Our practice has all research approved by an ethics committee and indemnified.	1	100	98	98.0%
C3-6b	Our practice conforms that the appropriate indemnity is in place for research, based on the level of risk.	1	137	135	98.5%
C3-6c	Our practice only transfers identified patient health information to a third party for quality improvement or professional development activities after we have obtained the patient's consent.	1	274	270	98.9%
C4.1a	Our patients receive appropriately tailored information about health promotion, illness prevention, and preventive care.	1	756	747	98.8%
C5-1a	Our clinical team is able to access relevant current clinical and other guidelines that help diagnose and manage our patients.	1	756	745	98.5%
C5-1b	Our clinical team supports consistent diagnosis and management of our patients.	1	756	747	98.8%
C5-2a	Our clinical team can exercise autonomy, to the full scope of their practice, skills and knowledge, when making decisions that affect clinical care.	1	755	755	100%
C5-3a	Our practice manages the handover of patient care both within the practice to other members of the clinical team and to external care providers.	1	756	745	98.5%
C6-1a	Our practice uses a minimum of three approved patient identifiers to correctly identify patients and their clinical information.	1	756	739	97.8%
C6-2a	Our practice has a system to manage our patient health information.	1	757	757	100%
C6-2b	If our practice is using a hybrid patient health record system, a note of each consultation/interaction is made in each system, and that record includes where the clinical notes are recorded.	1	108	100	92.6%
C6-3a	Our patients are informed of how our practice manages confidentiality and their personal health information.	1	756	687	90.9%
C6-3b	Our patients are informed of how they can gain access to their health information we hold.	1	756	743	98.3%
C6-3c	In response to valid requests, our practice transfers relevant patient health information in a timely, authorised, and secure manner.	1	754	752	99.7%
C6-3d	Only authorised team members can access our patient health records, prescription pads, and other official documents.	1	756	753	99.6%
C6-4a	Our practice has a team member who has primary responsibility for the electronic systems and computer security.	1	756	751	99.3%
C6-4b	Our practice does not store or temporarily leave the personal health information of patients where members of the public could see or access that information.	1	756	747	98.8%
C6-4c	Our practice's clinical software is accessible only via unique individual identification that gives access to information according to the person's level of authorisation.	1	756	751	99.3%
C6-4d	Our practice has a business continuity and information recovery plan.	1	756	614	81.2%
C6-4e	Our practice has appropriate procedures for the storage, retention, and destruction of records.	1	756	740	97.9%
C6-4f	Our practice has a policy about the use of email.	1	756	738	97.6%
C6-4g	Our practice has a policy about the use of social media.	1	755	732	97.0%

C7-1a	Our practice has an individual patient health record for each patient, which contains all health information held by our practice about that patient.	1	757	752	99.3%
C7-1b	Our active patient health records contain, for each active patient, their identification details, contact details, demographic, next of kin, and emergency contact information.	1	757	654	86.4%
C7-1c	Our patient health records include records of consultations and clinical related communications.	1	757	673	88.9%
C7-1d	Our patient health records show that matters raised in previous consultations are followed up.	1	757	747	98.7%
C7-1e	Our practice routinely records the Aboriginal or Torres Strait Islander status of our patients in their patient health record.	1	755	719	95.2%
C7-1f	Our practice routinely records the cultural backgrounds of our patients in their patient health record, where relevant.	0	756	672	88.9%
C7-1g	Our patient health records contain, for each active patient, lifestyle risk factors.	1	757	639	84.4%
C8-1a	Our non-clinical staff complete training appropriate to their role and our patient population.	1	757	662	87.5%
C8-1b	Our non-clinical staff complete cardiopulmonary resuscitation (CPR) training at least every three years.	1	757	565	74.6%
QI1-1a	Our practice has at least one team member who has the primary responsibility for leading our quality improvement systems and processes.	1	756	737	97.5%
QI1-1b	Our practice team shares information internally about quality improvement and patient safety.	1	756	731	96.7%
QI1-1c	Our practice seeks feedback from the team about our quality improvement systems and the performance of these systems.	1	756	710	93.9%
QI1-1d	Our practice team can describe areas of our practice that we have improved in the past three years.	1	755	713	94.4%
QI1-2a	Our practice collects feedback from patients, carers and other relevant parties in accordance with the RACGP's Patient feedback guide (available at www.racgp.org.au/ running-a-practice/practice-standards/standards-5th-edition/patient-feedback-guide).	1	756	684	90.5%
QI1-2b	Our practice analyses, considers and responds to feedback.	1	756	618	81.8%
QI1-2c	Our practice informs patients, carers and other relevant parties about how we have responded to feedback and used feedback to improve quality.	1	756	599	789.2%
QI1-3a	Our practice team uses a nationally recognised medical vocabulary for coding.	0	756	706	93.4%
QI1-3b	Our practice uses relevant patient and practice data to improve clinical practice (eg chronic disease management, preventive health).	1	755	739	97.9%
QI2-1a	Our active patient health records contain a record of each patient's known allergies.	1	757	741	97.9%
QI2-1b	Each active patient health record has the patient's current health summary that includes, where relevant: • adverse drug reactions • current medicines list • current health problems • past health history • immunisations • family history • health risk factors (eg smoking, nutrition, alcohol, physical activity) • social history, including cultural background.	1	757	498	65.8%
QI2-2a	Our active patient health records contain, where relevant, a record of each patient's: • assigned sex at birth • variations of sex characteristics • gender.	1	756	745	98.5%
QI2-2b	Our patients are informed of the purpose, importance, benefits, and risks of their medicines and treatments.	1	756	751	99.3%
QI2-2c	Our patients are made aware of their role in their own treatment.	1	756	747	98.8%
QI2-2d	Our clinical team accesses current information on medicines, and reviews our prescribing patterns, in accordance with best available evidence.	1	756	730	96.6%
QI2-2e	Our clinical team ensures that medicines, samples and medical consumables are acquired, stored, administered, supplied and disposed of in accordance with manufacturers' directions and relevant laws.	1	753	656	87.1%

QI3-1a	Our practice monitors, identifies, responds to and reports near misses and adverse events in clinical care.	1	756	691	91.4%
QI3-1b	Our practice team makes improvements to our clinical risk management systems in order to prevent near misses and adverse events in clinical care.	1	756	682	90.2%
QI3-2a	Our practice follows an open disclosure process that is based on the Australian open disclosure framework.	0	756	671	88.7%
GP1-1a	Our practice provides different consultation types to accommodate patients' needs.	1	756	754	99.7%
GP1-1b	Our practice has a triage system.	1	756	751	99.3%
GP1-1c	Our recorded phone message advises patients to call 000 in case of an emergency.	0	756	742	98.2%
GP1-2a	Our patients can access home and other visits when safe and reasonable.	1	754	736	97.6%
GP1-3a	Our patients are informed about how they can access after-hours care.	1	757	739	97.6%
GP1-3b	Our patients can access after-hours care.	1	756	734	97.1%
GP2-1a	Our patients can request their preferred practitioner.	1	750	749	99.9%
GP2-1b	Our health service provides continuity of care.	1	756	749	99.1%
GP2-2a	Pathology results, imaging reports, investigation reports, and clinical correspondence that our practice receives are: • reviewed • electronically notated, or, if on paper, signed or initialled • acted on where required • incorporated into the patient health record.	1	756	677	89.6%
GP2-2b	Our practice recalls patients who have clinically significant results.	1	756	705	93.3%
GP2-2c	Our patients are advised of the practice's process for follow-up of tests and results.	1	756	747	98.8%
GP2-2d	Our practice initiates and manages patient reminders.	0	756	753	99.6%
GP2-2e	High-risk (seriously abnormal and life-threatening) results identified outside normal opening hours are managed by our practice.	1	756	753	99.6%
GP2-3a	Our practice collaborates with other health services to deliver comprehensive care.	1	756	756	100%
GP2-3b	Our practice's referral letters are legible and contain all required information.	1	755	726	96.2%
GP2-4a	Our practice team transfers care to another practitioner (in our practice or in another practice) when a patient requests the transfer.	1	756	755	99.9%
GP2-4b	Our practice facilitates the transfer of care of a patient when the practitioner requests transfer of care.	1	756	754	99.7%
GP3-1a	Members of our clinical team: • have current national registration where applicable • have accreditation/certification with their relevant professional association • actively participate in continuing professional development (CPD) relevant to their position and in accordance with their legal and professional organisation's requirements • have undertaken training in cardiopulmonary resuscitation (CPR), in accordance with the recommendations of their professional organisation, or at least every three years.	1	757	440	58.1%
GP3-1b	GPs working in our practice are one or more of the following: • A vocationally registered (VR) GP • A medical practitioner on a pathway to general practice Fellowship • A general practice registrar under appropriate supervision from a qualified VR GP • Working under an approved workforce program Where recruitment of recognised GPs or doctors on a pathway to Fellowship has been unsuccessful, our practice ensures doctors have the qualifications and training necessary to meet the needs of patients.	1	757	727	96.0%
GP3-1c	Our clinical team is trained to use the practice's equipment that they need to perform their role safely and effectively.	1	756	594	78.6%
GP3-1d	Our clinical team is aware of the potential risks associated with the equipment they use.	1	757	593	78.3%

GP4-1a	Our practice has at least one clinical team member who has primary responsibility for: • coordinating prevention	1	757	673	88.9%
	and control of infection • coordinating the provision of an adequate range of sterile equipment (reprocessed or disposable) • where relevant, having procedures for reprocessing (sterilising) instruments onsite or offsite, and				
	ensuring there is documented evidence that this reprocessing is monitored and has been validated • safe storage and				
	stock rotation of sterile products • waste management.				
GP4-1b	Our practice has a written, practice-specific policy that outlines our infection control processes.	1	757		95.6%
GP4-1c	Our practice has a clinical team member who has primary responsibility for educating the practice team about infection prevention and control.	0	757		97.2%
GP4-1d	All members of our practice team manage risks of potential cross-infection in our practice by methods that include: • good hand hygiene practices • the use of PPE • triage of patients with potential communicable diseases • safe storage and disposal of clinical waste including sharps • safe management of blood and body fluid spills.	1	757	700	92.3%
GP4-1e	Our patients are informed about respiratory etiquette, hand hygiene, and precautionary techniques to prevent the transmission of communicable diseases.	1	757	738	97.5%
GP4-1f	Our practice records the sterilisation load number from the sterile barrier system in the patient's health record when sterile items have been used and records the patient's name against those load numbers in a sterilisation log or list.	1	731	549	75.1%
GP5-1a	Our practice's facilities are fit for purpose.	1	757	744	98.3%
GP5-1b	All face-to-face patient consultations in our practice take place in a dedicated consultation or examination space.	1	757	757	100%
GP5-1c	Our consultation spaces permit patient privacy and confidentiality.	1	757	736	97.2%
GP5-1d	Our practice has a waiting area that accommodates its usual number of patients and other people who would be waiting at any given time.	1	757	757	99.90%
GP5-1e	Our practice has access to toilets and hand-cleaning facilities.	1	757	757	100%
GP5-1f	Our practice is visibly clean.	1	757	749	98.9%
GP5-2a	Our practice has equipment that enables us to provide comprehensive primary care and emergency resuscitation, including: • auriscope • blood glucose monitoring equipment • disposable syringes and needles • equipment for resuscitation (ie equipment for maintaining an airway for adults and children, and equipment to assist ventilation,	1	756	692	91.5%
	including bag and mask) • intravenous access • emergency medicines • examination light • eye examination equipment (eg fluorescein staining) • gloves (sterile and non-sterile) • height measurement device • measuring tape				
	• equipment for sensation testing • ophthalmoscope • oxygen • patella hammer • peak !ow meter • PPE • pulse				
	oximeter • scales • spacer for inhaler • specimen collection equipment • sphygmomanometer (with small, medium				
	and large cuffs) • stethoscope • surgical masks • thermometer • torch • tourniquet • urine testing strips, including				
CD5 01	pregnancy testing kits • vaginal specula • visual acuity charts • the ability to view X-rays.	1	7.57	744 757 736 757 757 749	06.70/
GP5-2b	Our practice maintains our clinical equipment in accordance with each manufacturer's recommendations.	1	757		86.7%
GP5-2c	Our practice has one or more height-adjustable beds.	1	757 757		99.9%
GP5-2d	Our practice has timely access to a spirometer and electrocardiograph.	1	755 756		99.1%
GP5-2e	Our practice has a defibrillator.	0	756		90.2%
GP5-3a	Each of our GPs has access to a fully equipped doctor's bag for routine visits and emergency care, containing: • auriscope • disposable gloves • equipment for maintaining an airway in adults and children • hand sanitiser • indate medicines for medical emergencies • practice stationery (including prescription pads and letterhead) • sharps container • sphygmomanometer • stethoscope • surgical mask • syringes and needles in a range of sizes •	1	755	657	87.0%
	container • convermentem • creinecone • curateal mack • curinger and needles in a range of cizes •				
	thermometer • tongue depressors				

	practice.				
GP6-1b	The team member who has primary responsibility for cold chain management ensures that the process used	1	756	668	88.4%
	complies with the current edition of the National vaccine storage guidelines: Strive for 5.				
GP6-1c	The team member who has primary responsibility for cold chain management reviews the following processes to	1	756	653	85.4%
	ensure potency of our vaccine stock: • Ordering and stock rotation protocols • Maintenance of equipment • Annual				
	audit of our vaccine storage procedures • Continuity of the cold chain, including the handover process between				
	designated members of the practice team • Accuracy of our digital vaccine refrigerator thermometer				
GP6-1d	Our practice has a written, practice-specific policy that outlines our cold chain processes.	1	756	707	93.5%

M = Mandatory indicator.