

**AUSTRALIAN COMMISSION
ON SAFETY AND QUALITY IN HEALTH CARE**

**Consultation Paper:
General Practice Accreditation Scheme**

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Table of Contents

Consultation Paper:.....	1
General Practice Accreditation Scheme	1
1.1. Introduction	3
1.2. Background.....	3
2. Model General Practice Accreditation Scheme.....	5
2.1. A governance structure to provide national coordination and oversight	5
2.2. An accrediting agency approval process	7
2.3. General practice accreditation data	8
3. How to provide feedback.....	12

1.1. Introduction

This consultation paper outlines the proposed model for general practice accreditation to support national coordination of the processes for accreditation of general practices.

This model has been developed in partnership with the Royal Australian College of General Practitioners (RACGP) and supports the Department of Health's (the Department) need to address a 2010/11 Australian National Audit Office (ANAO) recommendation to better understand the quality of general practice accreditation.

To ensure the accreditation scheme meets the need of the general practice sector, feedback is sought through a public consultation process outlined on page 12.

1.2. Background

General practice accreditation was introduced in conjunction with the implementation of the Practice Incentive Program (PIP) in 1998. To better target access to incentive payments available under PIP, accreditation against the RACGP's *Standards for General Practice* (the RACGP Standards) was introduced as a practice eligibility criteria.¹

General practice accreditation is voluntary in Australia. While the exact number of general practices in Australia is not known, it is estimated that in 2013 approximately 83% of general practitioner services were provided by accredited practices.

In 2010/11 the ANAO undertook a review of the Department's effectiveness in undertaking PIP program planning, monitoring and review. The ANAO made three recommendations to the Department to:

1. develop the capability to understand the affect of PIP design on the uptake and success of incentives
2. develop an evaluation strategy and public reporting regime for PIP
3. develop a mechanism to inform itself of the quality of general practice accreditation.

The ANAO found that under current arrangements, the Department has limited assurance over the quality of accreditation processes, in particular, the consistency of assessments and practice compliance with the RACGP Standards. This was due to:

- differing requirements of the two accrediting agencies
- the absence of a risk-based interim assessment for practices to ensure adherence to the standards across the accreditation cycle
- the auditability of the current standards and their applicability to all general practice settings
- a lack of formal mechanisms to capture and monitor data on the quality of accreditation processes
- no evaluation of the reliability, validity and consistency of accreditation processes as the entry criterion to PIP.

The Department accepted all three of the ANAO recommendations and in 2013 proposed that the Australian Commission on Safety and Quality in Health Care (the

Commission) partner with the RACGP to develop a model accreditation scheme for general practices in Australia, specifically to address recommendation 3.

A key deliverable of the RACGP and Commission partnership is the development of a governance and reporting framework for general practice accreditation.

The Commission undertook a literature review focusing on general practice and primary care accreditation programs in six countries: Australia, New Zealand, England and Wales, Canada, Denmark and the Netherlands. Key findings from the comparative analysis were that:

- the accreditation of Australian general practices is mature in comparison to other international systems for primary care accreditation
- participation in accreditation by Australian general practices is driven primarily by access to PIP incentives
- there is no mechanism for monitoring the impact of accreditation on patient outcomes
- accreditation to the RACGP standards cannot be accessed by all general practitioners providing services in Australia based on the RACGP definition of general practice
- internationally, work is underway to align standards and nationally consistent approaches to accreditation in primary and acute care settings.

The Commission has consulted widely with the general practice sector on the current accreditation system. Participants identified areas for possible improvement of current general practice accreditation processes including:

- incorporating requirements for activities throughout the accreditation cycle instead of a single assessment event
- developing mechanisms for recognising high performing practices
- increasing the rigor of assessments to reduce opportunities for 'gaming' of the process
- consider reviewing accrediting agencies processes for surveyor recruitment and training, and customer support
- RACGP considering changes to the standards for general practice to include safety and quality content and increase the focus on patient outcomes
- introduction of a general practice accreditation scheme that included:
 - a mechanism for investigating complaints and possible breaches of standards
 - processes for managing practice practices that fail to meet accreditation criteria
 - processes for ensuring practices comply with assessment recommendations
 - systems to address inter-rater reliability
- improving the availability of support for practices to attain accreditation.

2. Model General Practice Accreditation Scheme

The proposed general practice accreditation scheme would include the following key elements:

1. a governance framework to provide national coordination of general practice accreditation
2. approval of accrediting agencies to enable the coordination of agencies performing assessments to the RACGP Standards
3. collection of accreditation data and evaluation of accreditation outcomes information.

2.1. A governance structure to provide national coordination and oversight

A governance framework for the General Practice Accreditation Scheme allows the roles, responsibilities and relationships of all those involved to be described.

The General Practice Accreditation Scheme would involve the:

- **Federal Health Minister** who sets policy direction and allocates funding for general practice services in Australia
- Australian Government **Department of Health** that implements government policy and administers funding programs for general practice
- **Royal Australian College of General Practitioners** that develops general practice standards, guidance and provides support for general practitioners
- **Australian Commission on Safety and Quality in Health Care** that provides national leadership on safety and quality in health care and has legislative responsibilities for establishing and maintaining accreditation schemes for safety and quality
- establishment of a **Coordinating Committee** which would be made up of individuals with skills and experience of accreditation in general practice, as well as key representatives of the sector to coordinate the processes of accreditation
- **general practices** that implement the RACGP Standards and participate in accreditation processes
- **accrediting agencies** that assess general practice compliance against standards.

The roles and responsibilities for the individuals and organisations described as part of the governance framework include:

1. the **Health Minister** who would endorse the General Practice Accreditation Scheme and receive summary reports about the performance of the Scheme.
2. the **Department of Health** that would participate in the Coordinating Committee and receive data on accreditation outcomes.
3. the **Royal Australian College of General Practitioners** that would be a member of the Coordinating Committee and participate in the review of accreditation

outcomes data, approval processes for accrediting agencies and would continue to produce implementation resource material for practices undergoing accreditation.

4. **Australian Commission on Safety and Quality in Health Care** would be a member of the Coordinating Committee, and would participate in the collection and review of accreditation outcomes data and administer the approval processes for accrediting agencies. It would also report on safety and quality of general practice and primary care using de-identified aggregated accreditation outcomes data to Ministers, and in public reporting on safety and quality, as part of its legislated function.
5. The **Coordinating Committee** would:
 - provide oversight of the coordination of general practice accreditation by:
 - identifying issues relating to the implementation of the General Practice Accreditation Scheme of concern to the RACGP, the Commission, general practices, the Department, accrediting agencies and other relevant bodies
 - discussing and identifying actions individuals and organisations members can take to address these issues
 - recommending actions to be progressed by the RACGP, the Commission or accrediting agencies
 - working collaboratively to implement agreed strategies, processes and/or solutions
 - review and interpret accreditation outcomes data
 - provide oversight of the accreditation outcomes data that is collected and reported
 - provide input into the accrediting agency approval process
 - report on de-identified general practice accreditation outcome information to the Department, RACGP and the Commission
 - provide oversight to any appeals processes.

The RACGP and/or the Commission could provide mediation and support for general practices undergoing accreditation assessment.

6. **Accrediting agencies** would be required to complete the approval process to use the RACGP Standards in accreditation of general practices. Approval would be dependent on accrediting agencies:
 - maintaining accreditation with a relevant international body
 - cooperating with the Coordinating Committee, the RACGP and the Commission on improving accreditation processes including working to maximise inter-assessor and inter-agency reliability
 - providing data on general practice accreditation outcomes to the Coordinating Committee, and complying with agreed reporting timeframes and processes.

Accrediting agencies would also ensure their contractual relationship with the general practices allowed for the sharing of data generated from the accreditation process to be made available to the Coordinating Committee for the purposes of reporting on and monitoring the General Practice Accreditation Scheme.

7. **General practices** would work to implement standards and maintain accreditation. Practices would select an approved accreditation agency to assess their compliance to the RACGP standards.

What does this mean for general practices?

General practices would continue to:

- choose their accrediting agency, but they would need to do so from the list of approved agencies
- implement the RACGP Standards
- participate in accreditation.

They would also now:

- have new avenues to raise concerns about the application of standards, and progress complaints and appeals of accreditation decisions through an independent body
- have assurances that accreditation processes are coordinated consistently across agencies to support consistent application and interpretation of the standards
- enable the development of resources and supports that practices may need
- allow the results and learnings from accreditation to inform the development of standards and resources by providing information to the RACGP.

Have your say:

- **Do you think the proposed General Practice Accreditation Scheme will improve accreditation processes for general practices?**
- **What else should change?**
- **What should not change?**

See page 12 for instructions for providing your feedback.

2.2. An accrediting agency approval process

It is proposed that agencies accrediting general practices will be required to be approved to assess to the RACGP Standards.

The process of approving accrediting agencies will be similar to the one used by the Commission for the Australian Health Service Safety and Quality Accreditation (AHSSQA) Scheme for assessment of the National Safety and Quality Health Service (NSQHS) Standards.

Approving accrediting agencies for the General Practice Accreditation Scheme could address a range of issues identified with the current accreditation arrangements.

These include:

- a lack of monitoring or evaluation of the quality, consistency or interagency reliability of accreditation processes or outcomes
- a lacking of routine reporting on general practice accreditation to the Department which manages general practice policy and funding mechanisms such as PIP
- limited access to grievance and appeals mechanisms for general practices administered by an independent arbiter

- limited formal mechanisms to engage and collaborate with accrediting agencies to improve coordination and inter-assessor reliability.

Opportunities exist for accrediting agencies not currently assessing general practices to be approved, where they meet the criteria.

Accrediting agencies seeking approval would need to:

- demonstrate they are fit and proper organisations with the capacity to accredit general practices, including having have robust recruitment, selection and training processes for surveyors
- agree to participate in activities to ensure consistency and coordination of general practice accreditation
- provide information on accreditation.

What does this mean for general practices?

In addition to the added benefits outlined above, general practices would also now have:

- increased choice between accrediting agencies, more competition and greater focus on customer service
- access to mediation, appeals and support beyond their accrediting agency administered by an independent arbiter.

Have your say:

- **What are the issues or benefits you see for general practices if accrediting agencies are required to be approved?**

See page 12 for instructions for providing your feedback.

2.3. General practice accreditation data

General practice accreditation data has historically been difficult to access. Current approaches to the collection of general practice accreditation outcomes data are fragmented and ad hoc, which has resulted in a reliance on other, less comprehensive, data sets to understand the safety and quality issues in the general practice sector.

Improved access to general practice accreditation data would provide RACGP with information to better inform the development of its standards, enable policy makers to better tailor policy and target programs to address the needs of general practice, and provide practices with information about the overall performance of the sector.

The collection of data on accreditation would not place any additional burden on general practices, as the proposed framework is only focused on the information generated by accrediting agencies from the assessment process. General practices would continue to undertake regular processes for notifying the Department of Human Services (Medicare) of their accreditation status for the purposes of PIP.

It would be the industry-based Coordinating Committee's responsibility to oversee the collection and review of accreditation outcomes data and the reports generated from this information.

Accrediting agencies, as a condition of their approval, would be required to report outcomes data. Changes to current contracts for services between accrediting agencies and general practices would allow the transfer of information to the Coordinating Committee. Reporting on accreditation data would use de-identified and aggregated information.

Access to the data, data security and quality requirements will be determined and monitored by the Coordinating Committee. The proposed access arrangements for general practice accreditation data are outlined in the table below.

Table: Proposed access arrangements for general practice accreditation data

Organisation to have access to data	Types of data to be accessed	Purposes for which data will be used
Australian Department of Health	<ul style="list-style-type: none"> ▪ General practice demographic data ▪ Accreditation status ▪ Safety and quality information (if collected) 	<ul style="list-style-type: none"> ▪ To assure itself of the quality of general practice accreditation for the purposes of managing the PIP (particularly with the current move to introduce a quality improvement incentive) ▪ To inform policy development and changes to the PIP scheme
Australian Commission on Safety and Quality in Health Care	<ul style="list-style-type: none"> ▪ General practice demographic data ▪ Accreditation status ▪ Indicators / criteria not met at assessment ▪ Safety and quality information (if collected) 	<ul style="list-style-type: none"> ▪ To meet its legislated obligations to report on the safety and quality of health care services to the Commonwealth ▪ To monitor the compliance of approved accrediting agencies with requirements ▪ To understand issues relating to the accreditation of general practices and develop strategies to progress these issues
Royal Australian College of General Practitioners	<ul style="list-style-type: none"> ▪ General practice demographic data ▪ Accreditation status ▪ Indicators / criteria not met at assessment ▪ Safety and quality information (if collected) 	<ul style="list-style-type: none"> ▪ To review and develop standards for accreditation of general practices that meet the needs of the profession and are appropriate for general practice ▪ To review and develop support resources and guidance documentation to facilitate implementation of the RACGP Standards for general practice ▪ To understand issues relating to the accreditation of general practices and develop strategies to progress these issues
General Practice Accreditation Coordinating Committee	<ul style="list-style-type: none"> ▪ General practice demographic data ▪ Accreditation status ▪ Indicators / criteria not met at assessment ▪ Safety and quality information (if collected) 	<ul style="list-style-type: none"> ▪ To provide oversight of the coordination of general practice accreditation ▪ To identify and understand issues relating to the accreditation of general practices and develop strategies to progress these issues
General practices	<ul style="list-style-type: none"> ▪ De-identified safety and quality information (if collected) ▪ De-identified indicators / criteria not met at assessment 	<ul style="list-style-type: none"> ▪ To benchmark individuals practices with other practices in their region / nationally

Under the General Practice Accreditation Scheme, it is proposed the following data be collected in the first instance:

Demographic data:

- Practice name
- Practice network (if relevant)
- Number and location of practice sites
- Practice location / rurality rating
- Practice workforce
 - GP FTE and head count
 - Other staff – Head count and/or FTE
- Date of assessment
- Assessment type (assessment of all standards, follow up assessment)
- Date accreditation expires

Standards ratings:

- Accreditation status
- Indicators / criteria not met at assessment

What does this mean for general practices?

General practices will not be required to collect or submit accreditation outcomes data. However, the collection of data could enable practices to have access to information about the overall performance of the general practice sector to enable benchmarking.

Have your say:

- **What are the issues or benefits you see for general practices if accreditation outcomes data is collected and reported?**

See page 12 for instructions for providing your feedback.

3. How to provide feedback

To ensure the scheme meets the needs of the general practice sector, the Commission is seeking feedback on these proposals.

You can contribute to this process by providing comments in writing, by letter or email. You may also call the Commission and provide your comments.

Submissions received may be published on the Commission's website, including the names and/or organisations making the submission. The Commission will consider requests to withhold part or all of the contents of any submission made. If requested, any submission that includes personal information identifying specific individuals may be withheld from publication or de-identified before submissions are published.

Submissions should be submitted by close of business on **Friday 24 July 2015** to be considered in the consultation process.

Submissions should include:

- name, organisation (if relevant) and contact details
- responses to the consultation questions
- any general comments
- additional information, for example, any technical, business information or research-based evidence the Commission should be made aware of that support your views or comments.

Submissions should address the following consultation questions:

- Do you think the proposed General Practice Accreditation Scheme will improve accreditation processes for general practices?
- What else should change?
- What should not change?
- What are the issues or benefits you see for general practices if accrediting agencies are required to be approved?
- What are the issues or benefits you see for general practices if accreditation outcomes data is collected and reported?

Submissions can be emailed to NSQHSStandards@safetyandquality.gov.au or sent by post to:

Consultation on the Proposed General Practice Accreditation Scheme
Australian Commission on Safety and Quality in Health Care
GPO Box 5480
SYDNEY NSW 2001

Questions relating to the consultation should be directed by email to accreditation@safetyandquality.gov.au or by calling the Commission on (02) 9126 3600.