AGPAL Accreditation - Definition of a General Practice

AGPAL accreditation, and the Standards on which it is based, is designed to assess a general practice as a combination of the physical facility and the organisation of services provided by that facility. The Royal Australian College of General Practitioners (RACGP) defines general practice as *person centred, continuing, comprehensive and coordinated whole person health care to individuals and families in their communities*.

The RACGP has established three (3) core criteria which specify the threshold requirements for determining whether a particular general practice or health service is eligible to be accredited against the RACGP *Standards for general practices*. The three (3) core criteria which MUST be met are:

1. The practice or health service operates within the model of general practice described in the RACGP definition of general practice (www.racgp.org.au/becomingagp/what-is-a-gp/what-is-general-practice); and
2. General practitioner services are predominantly of a general practice nature (‘Predominantly’ is defined by the *Health Insurance Vocational Registration of General Practitioners Regulations 1989* as ‘more than 50% of clinical time, and more than 50% of services for which Medicare benefits are claimed are in general practice’); and
3. The practice or health service is capable of meeting all mandatory indicators in the current RACGP *Standards for general practices*.

Practices or health services that ‘target’ people and communities to address health inequalities by providing culturally appropriate care or provide general medical care to specific groups such as women, children, migrants, the aged should be considered as eligible for AGPAL accreditation provided they provide ‘person centred, continuing, comprehensive and coordinated whole-person health care’ and provided they have systems to deal with requests for care by patients outside the target population, particularly those needing urgent treatment.

In relation to ‘comprehensive’ and ‘whole-person’ health care, services that target groups would be considered eligible only if they are providing the full range of generalist services that might be required to the ‘target’ group. Generalist services include (but are not limited to):

- short term illness e.g. flu;
- preventative e.g. pap smears/prostate checks, immunisations;
- chronic illnesses e.g. high blood pressure, arthritis;
- pain e.g. back pain, headaches;
- trauma e.g. stitching up a cut.

Types of services that would be considered ineligible to be accredited as a general practice include those that provide specialist rather than generalist service; for example, pain management clinics, complimentary health clinics, skin clinics etc.
The following information is designed to clearly communicate the definition of a Medical Deputising Service to organisations seeking consideration for accreditation by AGPAL as a Medical Deputising Service.

AGPAL accreditation, and the Standards on which it is based, is designed to assess a Medical Deputising Service as a combination of the physical facility and the organisation of services provided by that facility.

A Medical Deputising Service is an organisation which arranges for or facilitates the provision of medical services to patients of general practitioners (Practice Principals) by other medical practitioners (Deputising Doctors) during the absence of, and at the request of, the Practice Principals.

A Medical Deputising Service must provide home visits, and may provide services at consulting rooms. The mandating of home visits does not confer a right for a patient to demand a home visit. Rather, it ensures the Medical Deputising Service is always in a position to provide home visits as required for significant medical reasons, or as requested by Practice Principals.

A Medical Deputising Service is required to operate and provide uninterrupted access to care, including home visits, throughout the whole of the Commonwealth defined after-hours period:

The defined after-hours period is:

- Weeknights (Monday to Friday inclusive) between 6 pm and 8 am the following day
- Weekends (Saturdays and Sundays) between 12 noon Saturday and 8 am the following Monday
- Public holidays – between 6 pm on the preceding day and 8 am the following day.

The following definition has been based on the Australian Government Department of Health’s definition contained within the Approved Medical Deputising Service Program Guidelines (v.2013 and v.2018) and the RACGP’s definition contained within the RACGP Standards for after-hours and medical deputising services (5th edition).

1. A Practice Principal is a registered medical practitioner (vocationally recognised or not, full-time or part-time), who undertakes the continuing care of patients in a medical practice. The Practice Principal has a responsibility to arrange comprehensive care of patients 24 hours a day and engages the Medical Deputising Service.

2. A Medical Deputising Service is an organisation which directly arranges for medical practitioners to provide after-hours medical services to patients of Practice Principals during the absence of, and at the request of, the Practice Principals.

3. A Medical Deputising Service is a means whereby a Practice Principal may externally contract the after-hours components of both continuous access to care and continuity of care to practice patients.

4. A Medical Deputising Service utilises facilities and processes which ensure continuous access to care and continuity of patient care.

5. A Medical Deputising Service comprises a physical facility which incorporates a control / communications / operations capacity, administrative services and, where applicable, a clinic.
6. A Medical Deputising Service must provide home visits and may also provide clinic and telephone triage / medical advice services. Medical Deputising Services must ensure that they are always in a position to provide home visits as required for significant medical reasons or as requested by Practice Principals, throughout the entire after-hours period.

7. A Medical Deputising Service shall respond to patient or Practice Principal-initiated calls only, and not provide routine patient services. Services provided must be predominately single episodes of care that are non-continuing, non-routine and predominately of a general practice nature.

8. A Medical Deputising Service must not schedule appointments beyond the after-hours period in which the patient request was received.

9. A Medical Deputising Service is required to operate and provide uninterrupted access to care, including home visits, for the whole of the after-hours period. The defined after-hours periods that must be covered by the Medical Deputising Service are: any time outside 8am – 6pm on weekdays from noon on Saturday, all day Sunday and public holidays. A Medical Deputising Service must demonstrate that consultations and home visits are provided during the unsociable hours from 11pm until 7am 7 days a week.

10. In providing complementary care on behalf of local, daytime general practice, a Medical Deputising Service must be independent of any individual or group of general practice(s). Medical Deputising Service premises must not be co-located with a general practice*.

11. As Medical Deputising Services do not offer comprehensive GP care, direct advertising to encourage patients to use Medical Deputising Services for ‘routine’ or convenience purposes, thereby compromising their access to the full range of GP services, is prohibited.

12. A Medical Deputising Service must have a control / communications / operations capacity which must be operational within its premises during the majority of the defined after-hours period, and must not be outsourced to an external agency.

13. A Medical Deputising Service which contracts out part of its control / communications / operations function may only do so to an accredited Approved Medical Deputising Service control / communications / operations service.

14. The control / communications / operations service must, during the after-hours period, be staffed by personnel appropriately trained in telephone triage, to guarantee maintenance of accreditation standards and ensure the appropriate management of urgent cases.

15. A Medical Deputising Service must have telephones attended 24 hours per day by trained staff so the Principals can access the service to communicate special patient information and facilitate continuity of care at all times.

*co-location is permissible only where the medical deputising service and general practice are operating as independent business entities, and where AGPAL’s co-location criteria is strictly met. Please contact AGPAL on 1300 362 111 for information relating to co-location criteria.
AGPAL Accreditation - Definition of an After Hours Service

The following information is designed to communicate AGPAL’s definition of an After Hours Service to organisations seeking consideration for accreditation by AGPAL as an After Hours Service.

AGPAL accreditation, and the Standards on which it is based, is designed to assess an After Hours Service as a combination of the physical facility and the organisation of services provided by that facility.

An After Hours Service is defined by the Royal Australian College of General Practitioners (RACGP) as a service that provides care outside the normal opening hours of a general practice, whether or not that service deputises for other general practices, and whether or not the care is provided within or outside of the clinic.

An After Hours Service model operates similar to a Medical Deputising Service in that it provides accessible and effective primary health care to people whose health condition cannot wait for treatment until their regular general practice is open; however, there are some distinct differences which are included in the following definition.

1. An After Hours Service comprises a physical facility that incorporates a clinic.
2. A general practice may formally engage (through a formal contract / service agreement) the After Hours Service to provide care to patients outside their normal opening hours.
3. An After Hours Service may provide home visits.
4. An After Hours Service shall respond to patient initiated contact after hours only, and not provide planned or routine patient services. Services provided must be predominately single episodes of care that are non-continuing, non-routine and predominately of a general practice nature.
5. An After Hours Service must not schedule appointments beyond the after-hours period in which the patient request was received.
6. An After Hours Service must only operate within the Commonwealth’s defined after-hours period. The defined after-hours period is:
   • Weeknights (Monday to Friday inclusive) between 6 pm and 8 am the following day
   • Weekends (Saturdays and Sundays) between 12 noon Saturday and 8 am the following Monday
   • Public holidays – between 6 pm on the preceding day and 8 am the following day
7. An After Hours Service must not offer, nor directly advertise the provision of comprehensive ongoing general practice care.