

Criterion GP1.1 – Responsive system for patient care

Indicators

GP1.1▶A Our practice provides different consultation types to accommodate patients' needs.

GP1.1▶B Our practice has a triage system.

GP1.1C Our recorded phone message advises patients to call 000 in case of an emergency.

Why this is important

The practice team is required to be able to identify patients' needs and provide appropriate care in order to treat patients effectively. Patients need to be referred to the right clinician to receive the right level of care within an appropriate period. Patients with urgent needs must be seen quickly.

When patients call the practice in the event of an emergency, they are not to be put on hold and must be directed to contact 000.

Meeting this Criterion

Consultations accommodate different patients' needs

Patients must be able to access care that is flexible and recognises their particular needs.

You are required to provide different types of consultation (eg long and short), different types of care (eg complex and preventive), and different levels of access (eg appointment systems or walk-in services) based on patients' needs.

In order to manage appointments, keep an appointment book (electronic or paper-based) in which you can arrange and record a variety of appointment types, including:

- long
- short
- walk-in
- recall
- reserved times for urgent appointments on the day.

Members of the practice team must assess the length of consultation a patient requires based on their needs. For example, the practice team could suggest a longer consultation if the patient is attending for multiple or complex problems, chronic disease management or procedures.

Longer consultations may also be required if the patient has complex medical needs, complex communication needs, impaired cognition, or if the patient's carer or a translator will be present. Some patients may always need longer appointments.

When there is an emergency, practice team members need to:

- update the patient waiting list
- explain to waiting patients that there has been an emergency and that this may increase their waiting time
- notify other patients who have not yet arrived that their appointment may be later than scheduled.

Your practice does not require a formal appointment system to meet this Criterion. For example, some practices do not take appointments but accept patients on a walk-in basis. If your practice prioritises patients according to urgency of need, and adequately informs patients of anticipated waiting times, you are accommodating patients' needs.

Technology-based consultations

You can conduct technology-based patient consultations (eg via telephone and internet-based video services such as Skype) in place of face-to-face consultations. When conducting a technology-based consultation, the practitioner must:

- confirm the identity of the patient using three patient identifiers (eg their full name, date of birth, and address)
- advise the patient of the security risks associated with technology-based consultations
- obtain the patient's prior written consent, if possible, before the consultation takes place.

The Medical Board of Australia's *Guidelines for technology-based patient consultations*¹ provides further information that you may find useful. You may also wish to obtain advice from your medical defence organisation regarding the suitability of providing advice by telephone or electronic means.

Triage

All members of the practice team must know how the practice:

- identifies patients with an urgent medical need
- identifies medical emergencies and reprioritises appointments accordingly
- seeks urgent medical assistance from a clinical team member
- deals with patients who have urgent medical needs when the practice is fully booked.

Training could be provided so that administrative staff members and members of the clinical team can identify patients in need of urgent care. This training can be delivered in-house by a practice member, or by an external training provider.

As administrative staff members may need to access patient health records so they can inform the clinical team of triage responses, they must know and comply with requirements relating to confidentiality of patient health records.

Telephone triage

Patients often contact general practices by telephone to make an appointment and sometimes immediately share their health concerns with the person who answers the phone. This may make it necessary for administrative staff members to assess the urgency of the need for care, effectively triaging patients.

Therefore, administrative staff members need to know:

- that they must ask, 'Is the matter urgent or may I put you on hold?' before putting a caller on hold
- which telephone calls they need to transfer to the clinical team.

Managing cross-infection through triage

Some patients will have a contagious illness and your practice needs to reduce the risks of the practice team and other patients becoming infected. The practice team must be familiar with the practice's infection control procedures, including the use of standard and transmission-based precautions, spills management, and environmental cleaning.

Effective telephone triage can identify the risk of infection before a patient presents at the practice.

Use transmission-based precautions for a patient known or suspected to be infected with a highly transmissible infection (eg influenza). You can minimise exposure to other patients and the practice team by:

- implementing effective triage and appointment scheduling
- using personal protective equipment (PPE) (eg masks)
- implementing distancing techniques, such as
 - spacing patients in the waiting room at least a metre apart
 - isolating the infected patient in a separate space
- strictly adhering to hand hygiene
- conducting a home visit.

Meeting each Indicator

GP1.1▶A Our practice provides different consultation types to accommodate patients' needs.

You must:

- provide a variety of consultation types, and retain evidence of this.

You could:

- document and keep up-to-date care plans, reviews, and health summaries in each patient's health records
- keep an appointment system (electronic or paper-based) showing a variety of appointment types, including
 - long
 - short
 - walk-in
 - recall
- reserved times for urgent appointments on the day
- display a sign in the patient waiting area explaining short, standard and long appointments
- display a sign on the front of the clinic providing the contact details for urgent care that is available outside normal opening hours
- offer technology-based consultations.

GP1.1▶B Our practice has a triage system.

You must:

- prioritise patients according to urgency of need, and retain evidence of this.

You could:

- have triage guidelines at the reception area
- have a triage flowchart available for reception staff members and the clinical team
- display a sign in the waiting area advising patients who have a high-risk condition or deteriorating symptoms to tell reception staff members

- show evidence that administrative staff members update the patient waiting list if there has been an emergency, and that they explain to patients that this may increase their waiting time.

GP1.1C Our recorded phone message advises patients to call 000 in case of an emergency.

You could:

- have a recorded phone message (which may be an introductory message or 'on hold' message) that tells patients to call 000 if they have an emergency
- train reception staff members in triage and how to respond to an emergency
- have triage guidelines at the reception area
- have a triage flowchart available for reception staff members.