

KEY ACTIONS
for general practices

Overview of the National General Practice Accreditation Scheme

The Australian Commission on Safety and Quality in Health Care (the Commission) is responsible for managing a number of national accreditation schemes, including the National General Practice Accreditation (NGPA) Scheme.

NGPA Scheme

The [NGPA Scheme](#) commenced in January 2017 with the primary aim to support the consistent accreditation of general practices nationally. Its aim is to ensure that assessment processes are robust and the outcome data generated is accurate and timely.

General practices participating in the NGPA Scheme are assessed against the [Royal Australian College of General Practitioners \(RACGP\) Standards for general practices fifth edition](#).

Accreditation of general practice is voluntary and is designed to review the systems for managing risks and to improve the quality of patient care.

Achieving and maintaining accreditation is a key requirement for access to the Department of Health's programs such as the [Practice Incentives Program \(PIP\)](#) and the [Workplace Incentive Program \(WIP\) – Practice Stream](#).

This fact sheet provides an overview of the NGPA Scheme and the common processes that support these assessments.

The accreditation flow chart for the NGPA Scheme can be found [here](#).

Approved accrediting agencies

One of the Commission's roles in administering the NGPA Scheme is to approve accrediting agencies. Approved accrediting agencies are vetted by an industry panel and found to have the capacity and workforce to undertake assessments. Further, they have agreed to work with the Commission to ensure the assessment process is rigorous, transparent and reliable.

There are [five accrediting agencies](#) with approval to assess general practices.

General practices that want to achieve or maintain accreditation are required to contract one of these five approved accrediting agencies to undertake their assessment.

Accreditation cycle

General practices will need to commence coordination of assessment processes between 12 to 18 months from its accreditation expiry date. An accreditation cycle is generally three years, with an assessment occurring before the end of each three-year cycle. The on-site assessment should be undertaken at least four months before this expiry date. This gives general practices time to have:

- Five business days after the on-site assessment to receive the interim report of not met indicators which they must address
- Up to 65 business days (90 days) for remediation of any of the indicators identified as not met at the on-site assessment.

Accrediting agencies then have 20 business days (30 days) to provide the general practice with its final report, which completes the assessment process.

Extension to the accreditation expiry date

An extension to the accreditation expiry date can only be granted by the Commission. Extensions will only be granted where there are extenuating circumstances that significantly impede a general practice's ability to participate in an accreditation assessment process. These extenuating circumstances are limited to:

- Natural disasters and other emergencies
- Significant personal hardship or tragedy that directly affects the governance of the general practice.

Before a general practice seeks an extension to its accreditation expiry date, they should review the eligibility criteria and ensure that all supporting evidence is included with their application.

All applications to extend an accreditation expiry date must be made through the general practice's contracted accrediting agency.

Further information on extension to an accreditation expiry date is available in [Advisory GP18/01 Extensions to the accreditation status](#).

Process for relocating to other premises

The relocation of any health service creates additional safety and quality risks for patients. This is also true for general practices. For this reason, general practices that plan to relocate are required to notify their accrediting agency as soon as practical.

The accrediting agency will work with the general practice during the transition to ensure a relocation assessment is completed. This assessment is required to ensure the safety and quality processes remain in place as other premises become operational and that the practice continues to comply with the [RACGP Standards for general practices fifth edition](#).

General practices that intend to relocate are also required to notify Services Australia of the move and provide them with an accreditation certificate that includes the new address following the relocation assessment.

Further information on relocation assessments is available in [Advisory GP18/03 Physical relocation of a general practice to other premises](#).

Transferring between accrediting agencies

General practices now have greater choice when seeking accreditation services and may choose to change their accrediting agency at the end of a contracted period or during their accreditation cycle.

General practices that decide to transfer to another accrediting agency are required to:

- Ensure all outstanding obligations to the existing accrediting agency are finalised
- Sign a services contract with the new accrediting agency prior to or immediately following the cancellation of the existing contract for accreditation.

Accrediting agencies are required to maintain a general practice's existing accreditation cycle, which means the timing of the general practice's next assessment should remain unchanged.

Further information on the transferring accrediting agencies is available in [Advisory GP18/02 Transferring accreditation between accrediting agencies](#).

Questions?

For more information, please visit the [NGPA webpage](#) on the Commission's website: safetyandquality.gov.au

You can also email the Commission's Safety and Quality Advice centre at AdviceCentre@safetyandquality.gov.au or call 1800 304 056.

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