

National General Practice Accreditation Scheme Overview

This document provides an overview of the National General Practice Accreditation (NGPA) Scheme and registration and assessment processes.

The NGPA Scheme

The NGPA Scheme commenced in January 2017. It aims to:

- support the consistent accreditation of general practices nationally
- ensure assessment processes are robust
- generate accurate and timely assessment outcomes data.

General practices participating in the NGPA Scheme are assessed against the Royal Australian College of General Practitioners (RACGP) [Standards for general practices](#) (5th edition) (the Standards) and the RACGP [Standards for point-of-care testing](#) (5th edition).

Accreditation is voluntary for general practices. However, it is an eligibility criterion to access Commonwealth funding through incentive programs managed by the Department of Health, Disability and Ageing (the Department) such as:

- [Practice Incentives Program \(PIP\)](#), which provides financial support for general practices to deliver quality care, enhance capacity, and improve access and outcomes.
- [Workplace Incentive Program \(WIP\) – Practice Stream](#), which assists general practices with the cost of engaging eligible health professionals.
- [MyMedicare](#), supports greater continuity of care and improved health outcomes by formalising the relationship between patients, their general practice, general practitioner (GP) and primary care teams.

It is the responsibility of the general practice to be aware of current requirements and comply with them to maintain eligibility.

Accrediting agencies

A key Commission function 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.

General practices that want to achieve or maintain accreditation are required to contract an approved accrediting agency to undertake their assessment.

The list of approved accrediting agencies is available [here](#).

Registration

Registration under the NGPA Scheme only applies to general practices that have never registered for accreditation with an accrediting agency and been assigned a unique identifier by the Commission.

Eligibility

General practices must:

- meet the RACGP definition of a general practice as outlined in the [‘Accreditation’](#) section of the Standards to be eligible for accreditation
- be operational at the time of registration
- confirm its ability to meet all relevant mandatory indicators from the Standards.

General practices may refer to the [Guidance on determining eligibility against the RACGP definition of a general practice for more information](#) to determine their eligibility prior to engaging an accrediting agency.

Once the general practice enters a contract with its preferred accrediting agency, the 12-month registration period begins.

Further information on registration is available in [Advisory GP25/01: Registration under the NGPA Scheme](#).

Accreditation

General practices:

- must first undertake a routine assessment to be achieve or maintain accreditation
- may be required to undertake additional assessments depending on the outcomes of the routine assessment and/or changes in circumstances following the routine assessment
- that do not adhere to the requirements, may have their accreditation withdrawn.

All costs associated with an assessment are the responsibility of the general practice being assessed.

Process for routine assessment

To maximise the available timeframes for each step of the routine assessment process and minimise the risk of the expiry date lapsing, the initial assessment should be undertaken:

- at least four months prior to the registration expiry date; or
- at least four months and no more than eight months prior to the accreditation expiry date.

The accrediting agencies must provide advice regarding the general practice's preferred assessment dates; however, it is ultimately the responsibility of the general practice to evaluate and accept any risks associated with their chosen dates.

The initial assessment must be conducted on site for general practices with physical premises¹ and virtually for general practices without physical premises. At the initial assessment, the assessors will:

- review the general practice's compliance against all relevant indicators in the Standards through a visual inspection, interviews with key personnel, and a review of documents
- determine any 'not applicable' ratings in accordance with [Advisory GP26/01: Advice on not applicable indicators under the NGPA Scheme](#)
- advise the general practice of any relevant indicators that could be rated 'not met'.

Within five business days of the initial assessment, the accrediting agency must provide an initial report to confirm the rating of each relevant indicator and the additional evidence required for any indicators that have been rated 'not met'.

The general practice has a remediation period of up to 65 business days to implement changes and provide the additional evidence required to meet the indicators that have been rated 'not met'.

Following the submission of all additional evidence, the accrediting agency must conduct a final assessment to determine if the indicators rated 'not met' at initial assessment have been remediated.

Within 20 business days of the final assessment, the accrediting agency must provide a final report and determine if accreditation is awarded for three years as below.

- For newly accredited general practices, the accreditation expiry date is three years from the date the accrediting agency determines the accreditation outcome.
- For previously accredited general practices, the new accreditation expiry date is three years from the previous accreditation expiry date unless the accreditation outcome was determined past the previous expiry date.

If at the final assessment, the general practice does not meet one or more relevant mandatory indicators, accreditation is not awarded. The general practice may re-engage an accrediting agency and undertake another routine assessment.

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

¹ Physical premises is defined as a building or rigid structure, including a bus or van, managed by the general practice where clinical assessments of patients take place.

Repeat assessment

A repeat assessment is required for general practices with 20% or more mandatory indicators rated 'not met' at their initial routine assessment. This is because they are unlikely to have sufficient time during the remediation period to fully embed all the changes required by the time accreditation is awarded.

Eligibility

General practices with 20% or more of mandatory indicators rated 'not met' following the initial assessment

The Commission:

- determines the need for a repeat assessment using assessment outcome reports
- notifies the general practice and accrediting agency.

Further information on repeat assessment is available in [Advisory GP23/03: Standardised repeat assessment of general practices](#).

Relocation assessment

A relocation assessment is required for general practices relocating to ensure compliance with the Standards is maintained at the new physical premises. This includes where general practices:

- are relocating in part, or whole
- have more than eight months remaining on their accreditation expiry date.

Further information on relocation assessment is available in [Advisory GP26/02: Relocation assessment of accredited general practices](#).

Out-of-cycle assessment

An out-of-cycle assessment may be required for general practices that experience changes in circumstance or performance that significantly increase the risk of patient harm. These include but are not limited to the following:

- change of ownership and governance
- change of key members of the leadership team and/or board, or prolonged gap in hiring key personnel
- expansion of all or part of the general practice
- change of the operational model
- merging of two or more general practices.

Further information on out-of-cycle assessment is available in [Guidance on out-of-cycle assessment of general practices](#).

Notification of significant risk

From time to time, lapses and errors may occur that result in an increased risk of harm to patients accessing care from a general practice.

Where an assessor identifies a significant risk during the initial assessment, it must be reported. When a significant risk has been identified during the initial assessment, the final assessment must be conducted on site, or virtually if operating without dedicated physical premises.

The reporting and assessment requirements are further outlined in [Advisory GP18/04: Notification of significant risk](#).

Transferring accrediting agencies

General practices may transfer to an approved accrediting agency during the three-year accreditation cycle, or during the 12-month registration period.

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

- ensure all outstanding obligations to the existing accrediting agency have been finalised
- consult with the new accrediting agency to determine the impact of the transfer on the timing of the general practice's assessment
- sign a contract with the new accrediting agency prior to or immediately following the cancellation of the existing contract for accreditation.

There are certain restrictions with transferring to an approved accrediting agency, including requirements of the accrediting agencies involved, which are outlined in [Advisory GP18/02: Transferring accreditation between accrediting agencies](#).

Extensions and Appeals

In some limited instances, a general practice may wish to:

- seek an extension to the timeframe of the assessment process
- seek an extension to their period of accreditation awarded, either in advance of the expiry date or retrospectively
- appeal a decision by the Commission regarding an accreditation extension request
- appeal on the basis that the accrediting agency has not followed processes set out in the NGPA Scheme.

A request for extension or appeal can only be granted by the Commission and must be submitted using the [Requests for extensions and appeals form](#).

Further information on extensions and appeals is available in [Advisory 23/02: Requests for extensions and appeals](#).

For more information

Please visit: safetyandquality.gov.au/ngpa-scheme



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