

Draft national set of practice-level indicators of safety and quality for primary health care

Dimension	Candidate indicators	Description	#
Accessibility	First contact to service wait time	The proportion of clients whose wait from first contact to first service is within the locally agreed timeframe	1
	First contact to service wait time for high-priority clients	The proportion of clients who are high priority according to locally agreed criteria, and whose wait from first contact to first service is within the locally agreed timeframe	2
	Eligible clients who received an appointment	The proportion of eligible clients requesting an appointment who received an appointment	3
	Non-attendance at appointment	The proportion of clients who did not arrive for an appointment, and who were followed-up	4
Appropriateness	Health summary	The proportion of regular clients with a comprehensive health summary, including information on allergies, current/past medical history, medications and risk factors, which was updated within the previous 12 months	5
	Timely initial needs identification	The proportion of clients whose initial needs identification was conducted, within the locally agreed timeframe	6
	Client assessment	The proportion of clients assessed, using validated assessment and screening tools appropriate to the scope of practice and the client's needs	7
	Complete care plan	The proportion of clients with multiple or complex needs who have a complete care plan	8
	Recalls and reminders	The proportion of clients with a complete care plan who were given recalls or reminders as recommended in the care plan	9
	Adherence to clinical guidelines	The proportion of clients with complete care plans that are in accordance with agreed clinical guidelines	10
	Timely review of care plan	The proportion of clients with a recorded care plan that is reviewed by the planned review date	11
	Medication review	The proportion of regular clients whose medicines have been reviewed by a health practitioner in accordance with locally agreed guidelines	12
	Interpreter services	The proportion of clients requiring an interpreter who were provided with interpreter services at the first service	13
	Cultural and linguistic diversity awareness/sensitivity	The proportion of the service's eligible workforce who have received cultural competency training	14
Acceptability/patient participation	Self-rated health	The proportion of regular clients who have completed a validated self-rated health status instrument that informs their health care	15
	Patient experience survey	The proportion of regular clients who have been given a patient experience survey within the previous 12 months, (using a standard patient experience instrument that informs the service's quality improvement)	16
	Patient experience survey response rate	The proportion of regular clients who have responded to a patient experience survey within the previous 12 months (using a standard patient experience instrument, that informs the service's quality improvement)	17
	Satisfaction with patient experience	The proportion of regular clients who are very satisfied with specified elements of their patient experience within the previous 12 months (using a standard patient experience instrument)	18

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Dimension	Candidate indicators	Description	#
	Client / carer complaints response	The proportion of client and carer complaints responded to within the service's nominated timeframe from receipt of complaint	19
	Client partnership in quality improvement	The proportion of clients who have been invited to contribute to quality improvement activities based on the results of the patient experience survey	20
	Client / carer engagement in care	The proportion of clients (and/or carers) who have discussed information about the purpose, treatment options, benefits, risks and costs of care, with a health practitioner	21
Effectiveness	Client improvement / stabilisation	The proportion of regular clients whose condition has improved, or stabilised (for conditions where improvement or stabilisation is expected)	22
	Self-rated client improvement / stabilisation	The proportion of regular clients whose condition has improved, or stabilised (for conditions where improvement or stabilisation is expected) as measured through a validated self rated health status instrument that informs their individual care	23
	Goals of care attainment	The proportion of goals met in the timeframe stated for attainment of each goal, for clients with a care plan	24
	Goals of care partially attained	The proportion of goals partially met in the timeframe stated for attainment of each goal, or appropriately renegotiated, for clients with a care plan	25
Coordination of care	Referral process	The proportion of service referrals that are made in accordance with the service's policy for referral processes (for appropriateness and timeliness)	26
	Referral content	The proportion of service referrals that contain appropriate identifying, clinical and contact information and a current medication list	27
	Allocation of a 'key contact' person/case manager	The proportion of clients with multiple or complex needs who are allocated a 'key contact person' or care coordinator, according to locally agreed guidelines, and are given their contact details	28
	Timely communication to health practitioners	The proportion of clients where timely reporting of care assessments or outcomes was communicated to all relevant health care practitioners involved in the client's care	29
Continuity of care	Timely review and follow-up of diagnostic results	The proportion of clients whose diagnostic results were reviewed by a health practitioner and acted on in a timely manner in accordance with agreed guidelines	30
	Medication reconciliation	The proportion of clients whose medication list has been reconciled against the service's patient health record	31
Safety	Adverse drug reactions and medication allergies	The proportion of clients whose known adverse drug reactions and medication allergies are documented in the service's patient health record	32
	Patient safety incidents investigations	The proportion of the service's documented patient safety incidents (i.e. near misses or errors, and adverse events that result in harm) where an investigation has been completed in accordance with local policy	33
	Patient safety incidents follow-up	The proportion of the service's documented patient safety incidents (i.e. near misses or errors, and adverse events that result in harm) where action is taken to reduce risks identified through the investigation	34
	Infection control	The proportion of the service's eligible workforce who have received infection control training within the previous 12 months	35

