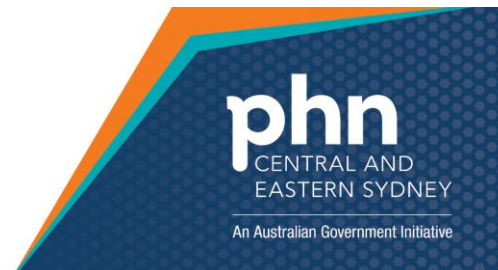


General Practice Accreditation

Preparation and sample timeline



This sample timeline commences at 12-18 months from expiry date of your current accreditation certificate, or for practices not yet accredited, the initial 12–18 month planning and implementation.

COUNTDOWN	KEY EVENTS	DESCRIPTION
Start	Register with an accreditation agency	Practice registers for accreditation: <ul style="list-style-type: none"> With an accreditation agency Once registered you will receive a registration certificate, username and password to access website and your practice online self-assessment portal. Review the RACGP Standards for Accreditation (5th edition)
Upon receipt of the practice registration certificate	Apply for the Practice Incentives Program (PIP)	Visit the Services Australia website and identify which Practice Incentive Program initiatives your practice may be eligible for: <ul style="list-style-type: none"> Services Australia – Practice Incentives Program
Support for your practice – Central and Eastern Sydney PHN (CESPHN)	Contact your Practice Support and Development Officer (PSO)	Your allocated Practice Support and Development Officer will meet with you and your team to help you prepare for Accreditation. They will develop a plan with you to support you over the next 12-18 months. Contact: practicesupport@cesphn.com.au
12–18 months to go	Initial review and start.	<ul style="list-style-type: none"> Discuss with your practice team roles and responsibilities for accreditation, what might be expected and add this item to your team meetings agenda so there is ongoing discussion, support and updates. Commence your self-assessment on your agency online portal reading the standards one by one and complete the required questions. You may identify some gaps in your practices processes and documentation. In this case you can reach out to your CESPHN PSO for support and guidance.
	Link in with your CESPHN Practice Support Officer	Some important documents that may be helpful to start with in developing or reviewing include: <ul style="list-style-type: none"> Patient feedback process Quality Improvement – RACGP key indicators Policy and Procedures Computer Information Security policies and procedures Business Continuity, Disaster and Pandemic, Business plans Privacy

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11 months to go	Ongoing review	<ul style="list-style-type: none"> Using gaps identified in the self-assessment, develop a priority task list.
	Link in with your CESPHN Practice Support Officer	<p>Other areas that you will need to focus on at this time may be:</p> <ul style="list-style-type: none"> Risk Management Clinical Governance Human resources Staff training Infection Prevention and Control Cold Chain Management
6 months to go	Final review and CESPHN support	<ul style="list-style-type: none"> Conduct a final review of accreditation criteria using the self-assessment online tool provided by your accreditation Agency. Arrange a Mock Survey visit with your Practice Support and Development Officer to: <ul style="list-style-type: none"> A walk through of the practice. Identify any final gaps for accreditation. Interview support for relevant staff. Follow up resources and support prior to agency visit.
	Surveyor allocation by your Agency	<ul style="list-style-type: none"> This process may take 4-6 weeks and the practice may be able to negotiate a date/day of the week.
4-5 months to go	Agency Survey Visit	<ul style="list-style-type: none"> Ensure all relevant staff members are on duty for the Agency survey visit. Have all documents readily available. Make sure a room is set aside for the surveyors to work in.
	Notification of results	<ul style="list-style-type: none"> May take 3-6 weeks after the survey visit. A full Accreditation certificate and report will be issued, OR Conditional accreditation will be granted with non-compliances to be addressed in prescribed time frames.
2-1 month to go	Remedial action	<p>If conditional accreditation is issued:</p> <ul style="list-style-type: none"> Undertake remedial action. Supply evidence as indicated by the assessment report. Contact your Practice Support and Development Officer for support with non-compliances.
Completion	Process complete	Accreditation achieved, <i>celebrate with your team!</i>

General Practice Accreditation

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36 months to go	Ongoing work on processes	Over the next two years the general practice continues to update processes, procedures and policies in response to feedback and changes in the practice.
		Link in with your Practice Support and Development Officer for ongoing practice support, keeping on track for the next Accreditation, including Quality Improvement quarterly activities and requirements against the PIP QI.
12-18 months to go	Reminder received	<p>Prepare for re-accreditation as before:</p> <ul style="list-style-type: none">Contact your Practice Support officer at CESPHN at practicesupport@cesphn.com.au

For further information, support and resources contact CESPHN – Practice Support and Development team at practicesupport@cesphn.com.au.

Whilst all care has been taken in preparing this document, this information is a guide only and subject to change without notice.