Engaging with other services

Engaging with other services is an important factor in practices providing a high level of quality healthcare. Engaging with other medical services, such as diagnostic services, hospitals and consultants, allied health, social, disability and community services, can assist the practice in providing optimal care to patients whose health needs might require integration with other types of services. Where relevant, practices are very much encouraged to coordinate patient care with other health services, including allied health and pharmacy, as well as social, disability, indigenous health and community services, across the general practice setting.

RACGP 4th Edition Standards

1.6.1 Our practice engages with a range of health, community and disability services to plan and facilitate optimal patient care.

Assessment methods

- Interview with GPs and staff

GPs and clinical staff should be able to confidently demonstrate how they plan and coordinate comprehensive care by interacting with health and other services.

- Documentation review

A copy of a local resource directory should be available for surveyors to review.

Meeting the Standards

It is appreciated that practices cannot possibly provide all the care needed for all the patients that visit them from their surgery rooms. GPs are always referring patients for ongoing tests or follow up with another service and it is a given that practices will continually engage with other services in caring for patients. It’s important that practices consider how they do this, and are confident in the professionalism of the service with whom they are engaging.

Practices must have readily accessible written or electronic information about local health, disability, community and mental health services, and how to engage with them to plan and facilitate patient care. It is common for practices to have an electronic resource directory of local health and other services, and this might even highlight the practice’s, or individual GP’s, preferred services. The resource directory should be simple for GPs or practice staff to search for applicable services when needed, and include the relevant contact details.
Best practice

Ideally the practice's policies and procedures manual will outline the above processes. This criterion does cross reference with Criterion 1.2.4 Costs associated with care initiated by the practice.

*N.B. Indicator B is only applicable to services providing care outside normal opening hours. After hours services are expected to seek feedback about the quality and responsiveness of their service from the practices whose patients they see.*