Respectful and culturally appropriate care

Patients have the right to respectful care at all times, care that ensures their dignity, privacy and safety. A number of federal and state/territory acts prohibit discriminatory treatment of people based on their personal characteristics.

RACGP 4th Edition Standards

2.1.1 Our practice provides respectful and culturally appropriate care for patients.

Assessment methods

- Interview with GPs, clinical staff and administrative staff

Surveyors will interview GPs, clinical staff and administrative staff. All staff should be able to confirm that the practice has a 'No Discrimination' policy, explain how patients are provided with respectful and culturally appropriate care, and be able to describe how the practice would provide privacy for patients, and others, who might be in distress. Clinical staff interviewed should be able to confidently demonstrate steps taken if a patient refuses their recommended advice, procedure or treatment plan, describe what the process is if a patient informs them that they intend to seek a second opinion, explain the process used to transfer a patient's care in a timely manner, and describe the process if a GP no longer wishes to treat a patient.

- Medical records review

Ideally, patient health records reviewed will include applicable notes in regard to transfer of care, as well as notes in regard to patients refusing advice, patients seeking a second opinion, and/or notes in relation to a GP no longer wishing to treat a patient, if that has indeed occurred at your practice.

Meeting the Standards

It is essential that GPs and all practice staff deal with patients in a respectful, polite and professional manner. Patient-doctor partnerships should be based on mutual respect and a mutual responsibility for the health of the patient. GPs and clinical staff must be familiar with the practice’s processes in relation to managing patients who refuse a specific treatment, advice or procedure, patients seeking a second opinion, and transferring patients care in a timely manner. All staff should be able to describe how the practice provides privacy for patients, and others, in distress, such as waiting in the treatment room with a nurse until a doctor can be seen, or waiting privately in a spare consultation room.
Best practice

Ideally, the practice’s policies and procedures manual will describe practice processes in relation to 2.1.1 Respectful and culturally appropriate care and discontinuation of care. If any of the situations outlined in 2.1.1 have occurred at your practice, ideally the situation will have been discussed at a clinical meeting. It is recommended that practices minute clinical meetings, and that a record is kept.