

2 August 2007

The Research Director
Health Quality and Complaints Commission Select Committee
Parliament House
George Street
BRISBANE QLD 4000



Dear Sir/Madam,

Thank you for your letter of 6 July 2007 advising of the Review of the performance of the Health Quality and Complaints Commission (HQCC) and the *Health Quality and Complaints Commission Act 2006*.

General Practice Queensland (previously Queensland Divisions of General Practice – QDGP) has been actively interested in the establishment of the HQCC and welcomes the opportunity to provide comments on the Review.

Comments in relation to the Terms of Reference:

(b) point 1.

*Whether the Commission has made satisfactory progress toward implementation of:
policies, procedures and systems to resolve complaints in a timely and responsive manner.*

General Practice Queensland has received feedback indicating that the HQCC policies and procedures for resolving complaints relating to general practice are variably understood within the general practice community. Moreover, there is little understanding of the power of the HQCC, and the breadth and scope of its authority. Given this, an HQCC communication strategy or awareness raising campaign targeting general practice could be helpful in raising the profile of the HQCC and increasing general practitioners' understanding of its services and activities.

(b) point 2.

Whether the Commission has made satisfactory progress toward implementation of systems to monitor and report on the quality of health services.

Comments provided to General Practice Queensland highlight a lack of information on the HQCC systems for monitoring and reporting on the quality of general practice services. The available HQCC information on its monitoring and reporting systems does not clearly articulate how or if these systems relate to existing general practice standards monitoring systems, including the Royal Australian College of General Practitioners (RACGP) Standards and the Australian General Practices Accreditation Limited (AGPAL) standards. It has also been suggested that it would be helpful if there were simpler, plain English information about the HQCC wherever possible.

Some general practices commented on the unexpected nature of their first encounter with the HQCC, which was when the HQCC contacted the general practitioner about a complaint or concern relating to the general practitioner.

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As noted above, a targeted communication strategy, together with some sector engagement and relationship building, may be useful in raising awareness of the HQCC and increasing its effectiveness.

(b) point 3

Whether the Commission has made satisfactory progress toward implementation of consumer engagement strategies about consumer rights and quality improvement in health services.

General practitioners have advised General Practice Queensland that, in general, patients/consumers in general practice settings have a limited understanding of consumer rights and quality improvement in health services. There is currently a range of organisations setting standards for health care providers, including general practice, and the process for consumers to exercise their rights and negotiate through the maze of standards needs to be clear and distinct.

For example, it is not uncommon for a patient/consumer to interact with standards regimes in general practice, in residential aged care facilities, and in Home and Community Care services, each of which has its own consumer rights and quality improvement arrangements. It may be useful therefore to develop an overarching framework for patients/consumers that shows clearly the different bodies that set and monitor standards and consumers rights in relation to these.

(b) point 4

Whether the Commission has made satisfactory progress toward implementation of strategies to proactively engage providers and other entities about the quality of health services, including the making of standards and quality improvement processes

General Practice Queensland met with Ms Cheryl Herbert, the CEO of HQCC in May 2007 to discuss a number of issues relevant to general practice.

Following the meeting with Ms Herbert, the Queensland GP Alliance met on 11 May and, amongst other things, discussed possible options for the HQCC to engage effectively with the general practice sector.

(The Qld GP Alliance was formed in 2003. It provides a unified voice for General Practice in Qld, and progresses key strategic priorities in a coordinated and collaborative manner. The Qld GP Alliance's member organisations are:

- General Practice Queensland;
- Australian Medical Association Qld (AMAQ);
- Royal Australian College of General Practitioners (RACGP);
- Rural Doctor's Association of Qld (RDAQ);
- Health Workforce Qld; and
- Australian College of Rural and Remote Medicine (ACRRM)).

The Qld GP Alliance wrote to Ms Herbert suggesting that an effective way to engage with the general practice sector would be to establish a General Practice Advisory Committee. (A copy of the letter is attached for your information.)

The Qld GP Alliance meet again on 20 July 2007 and agreed to convey to you the suggestion contained in the letter to MS Herbert, that is, that a General Practice

Advisory Committee be established to provide ongoing advice and input to the HQCC.

It is also suggested that membership of the General Practice Advisory Group be drawn from General Practitioners who are familiar with General Practice standards, including the current 3rd edition of the RACGP standards for General Practice, which are used as a benchmark in the evaluation of general practices for accreditation.

A General Practice Advisory Committee would provide clarity and direction for general practice in relation to several issues identified by general practice, including, but not limited to:

- Communicating to GPs how the HQCC standards are and/or will be set and when and how they apply to general practice;
- Describing how general practice will be supported to meet the standards;
- Specifying data collection arrangements (including available funding) in, for example, managing acute myocardial infarction post discharge; and
- Supporting and continuing to educate general practitioners on data collection and analysis issues.

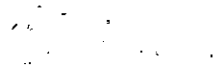
General comments:

We noted above in relation to (b) point 3 that there are numerous organisations that are setting standards for health care, one of which is the Australian Commission on Quality and Safety in Health Care. We think it would be useful to clarify the relationship between the HQCC and the Australian Commission on Quality and Safety in Health Care, including the Australian Commission's five year work plan as endorsed by the Australian Health Ministers' Conference in November 2007.

Finally, there appears to be a structural tension between the HQCC's dual priorities of Quality Improvement and complaints management. Because of this, it will be important to have transparent, publicly available accountabilities for the HQCC's ongoing priorities and emphases.

Thank you for the opportunity to provide these comments. Should you require further information or clarification of any issues, please contact Ms Ann Maree Liddy, CEO, General Practice Queensland on 3105 8300.

Yours sincerely


Dr John Kastrissios
President
General Practice Queensland