

# Key Takeaways - RACGP

## Common Non-Compliances

### Top 10 Most Common Non-Compliances:

#### Clinician Qualifications (GP3.1A, GP3.1C)

Ensure up-to-date CPD, CPR, and induction records. Use a tool to conduct HR record audits.

#### Health Summaries (QI2.1B)

Ensure each patient file contains a complete, up-to-date health summary. Use system reports, PDSAs and self-audit to monitor.

#### Workplace Immunisations (C3.5B)

Maintain an immunisation register. Document refusals, use MyGov history, and assess immunisation relevance to role.

#### Non-Clinical Staff CPR (C8.1B)

Track CPR training for all staff. Try booking group sessions.

#### Patient Feedback (QI1.2 A–C)

Don't leave it until the last minute. Maintain a feedback register for ad hoc suggestions outside the formal survey.

#### Risk Management (C3.1C)

Maintain a current risk register and update it regularly.

#### Vaccine Management (GP6.1C)

Complete and retain the cold chain self-audit. Support Coordinator to feel ownership over the cold chain.

#### Clinical Incidents & Near Misses (QI3.1 A–B)

Use a register to track incidents and near misses, and monitor recurring issues.

#### Doctors Bag (GP5.3A)

Maintain a quarterly checklist. Avoid expired or missing items.

#### Business Continuity & Information Recovery Plan (C6.4D)

Maintain an up-to-date, comprehensive plan. Test and evidence full data restoration every 6 months.

### ⚠ High-Risk Topics

- GP4.1 – Reprocessing Instruments
- GP6.1 – Vaccine potency
- GP2.2 – Follow-up systems
- QI2.2 – Safe and quality use of medicines

### ✓ Quick Wins & Tips

- Audit HR files ahead of time.
- Prepare the team to avoid interview panic.
- Minute at least one prep meeting – it can support evidence for over 20 indicators.
- Conduct a final expiry date check on consumables and medicines.
- Get creative with patient feedback promotion (e.g., posters, websites, socials).

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