

Premises Agreement Checklist

Guide Only – use in with sample template

CheckUP recommends that service providers engage in a *Premises Agreement* with the facility they are providing services from. This is to reduce the potential for miscommunication to occur after a service has been initiated, and to improve patient safety and quality of care. The document should clearly outline the roles, responsibilities, and requirements of both parties to ensure safe and high-quality healthcare can be achieved. The development of a mutually agreed *Premises Agreement* will establish a clear framework for service providers and facilities involved in the delivery of health services across Queensland.

To assist with this process CheckUP has developed a ‘checklist guide’ below of categories service providers and facilities may consider discussing in the development of the documentation or during the facility orientation.

Consideration for discussion (before starting)

- Adequate public liability cover (All outreach providers must be covered by public liability insurance provided either by the facility or the health professional).
- Organisation’s/facility’s Working with Vulnerable Persons and Child Safe Organisation requirements
- Clinical Service Capability (what is the facility accredited to deliver e.g. Primary healthcare services to adult patients) <https://www.health.qld.gov.au/clinical-practice/guidelines-procedures/service-delivery/cscf/about>
- Facility Fee – will it be charged and what will it include?
- Credentialling and scope of practice requirements.
- Minimum equipment requirements to ensure service provider can deliver necessary service. Who pays for disposables?
- Availability of administration, nursing, and health worker support to assist.

- Booking, confirming appointments and follow up – how will patients be followed up if they miss or cancel their appointment? Whose responsibility will this be? (Also, financial implications for patients who DNA and mechanisms in place to support attendance at appointments).
- Administration support for patient appointments and MBS billing.
- Minimal patient numbers for MBS billing
- MBS claiming Medicare item numbers for nursing, or Aboriginal Health Worker support – will these go to the practice or provider?
- Appointment and session scheduling and times.
- Medical records and clinical data systems – will your records be stored on the facility’s medical record system or your own?
- Internet access
- Access to treatment room
- Access to IT equipment such as a desktop computer or phone
- Patient transportation
- Upskilling requirements or opportunities
- Local accommodation options
- Facility hours of service
- Alternative options for virtual appointments and telehealth
- COVID implications – safety requirements
- Does the facility offer a safe and secure environment?

Facility Orientation (First Visit)

- Introduction to facility staff
- Overview and training of systems, bookings etc.
- Password access to facility records if relevant

- Security pass
- Governance overview and local contact person (Practice Manager, CEO or Lead Clinician) if any operational or clinical issues arise (e.g. a clinical incident).
- Cultural competency expectations and orientation.
- Availability of a local cultural mentor, Aboriginal Health Worker support or chaperones.
- Knowledge of appropriate referral pathways – local HHS and HealthPathways

Workplace Health and Safety

- Workplace health and safety requirements
- Determine how to access emergency medical care or security if required
- Access to first aid kit

Clinical Governance

- Incident and adverse event handling policies and procedures.
- Infection control procedures
- Access to medical records and clinical data systems. –How will you access facilities/organisation's records and share patient care plans? Is there access to Queensland Health's Viewer?
- Confidentiality, information privacy and informed consent procedures.
- Patient feedback mechanisms.

Patient Management

- Referral process and follow up referral criteria
- Follow up on patient test results – how will pathology, radiology and other test results be followed up and reported back to patient's primary care provider, and or yourself
- Handover - how will handover of patient care back to primary care provider occur after the provider has finished their consultation? (e.g. letter)