

Common compliance issues associated with findings of inappropriate practice

Information on the common issues associated with inappropriate practice based on Professional Services Review (PSR) outcomes.

Common themes in findings of inappropriate practice

There are common themes where there is an outcome of inappropriate practice after a review under the PSR Scheme. Some common concerns, and examples of why there was a finding of inappropriate practice include:

- MBS requirements not always met: MBS item time requirements were not met, and/or the services did not meet the item descriptor. Examples of services not meeting the item descriptor include:
 - for MBS item 723, not collaborating with at least two other healthcare providers, or patients did not have eligible chronic conditions
 - urgent after-hours services rendered to patients who did not require urgent assessment or treatment
 - for MBS item 104 and 105, insufficient evidence of personal attendance or no referral requesting a specialist consultation for MBS items.
- Inadequate records: the documentation would not assist another practitioner to manage the
 patient's condition, the records did not record or justify the service provided, there were
 inadequate patient history and summaries, the records did not reflect adequate clinical input,
 there was insufficient documentation of referred specialist consultations, and/or records were not
 contemporaneous.
- Insufficient clinical input: insufficient evidence of assessment, examination or consideration of underlying conditions relating to the service provided, Chronic Disease Management (CDM) or GP Management Plans were not comprehensive or sufficiently individualised.
- Not all services were clinically indicated: the treatment provided for the patient's presenting complaint did not appear to be clinically indicated, co-claiming MBS items where not clinically indicated.
- Patient consent not adequately recorded: either not always obtained or not documented.
- Prescribing: practitioner did not always comply with PBS restrictions, prescribing without appropriate clinical indication, prescribing while otherwise inadequately managing a patient's condition.