



Appendix 1

**This appendix was part of the submitted manuscript and has been peer reviewed.
It is posted as supplied by the authors.**

Appendix to: Crossland L, Janamian T, Jackson CL. Key elements of high-quality practice organisation in primary health care: a systematic review. *Med J Aust* 2014; 201 (3 Suppl): S47-S51. doi: 10.5694/mja14.00305.

Appendix 1 Methods

A narrative systematic literature review was undertaken. The specific questions addressed were: what elements (attributes or characteristics) were demonstrated to be integral to high quality primary care practice organisation and what are the current key considerations relating to organisational performance in primary care?

Eligibility criteria

Abstracts were included if they were identified through the search term ‘organisational assessment and quality improvement’ or ‘high functioning’ general practice, primary care or primary health care. Full papers were then sourced for further review.

Information Sources

A search was conducted in a range of electronic databases, namely: PubMed, the Cochrane Library, EMBASE, the European Foundation for Primary Care, Emerald Insight, PsychInfo, the Primary Health Care Research and Information Service (PHCRIS) website and Google Scholar. Additional papers and reports were identified through the reference lists of all reviewed studies. All additional articles and reviews identified through this snowballing process underwent the screening and data extraction process as detailed below. Other reports and unpublished papers were identified from interviews with stakeholders which included the end users (general practices) and key experts in quality improvement in following organisations: the Australian Commission on Quality and Safety, Australian General Practice Accreditation Limited, the Australian Association of Practice Managers, the Australian Primary Health Care Nurses Association, the Chronic Disease Alliance, Australian Alliance of Medicare Locals and the Royal Australian College of General Practitioners.

Search strategy

The following search terms and MeSH and major topic headings were used: (general practice [MeSH Terms] OR general practice [All Fields]) AND ("quality improvement"[MeSH Terms] OR "quality improvement"[All Fields]) “General Practice/organisation and administration”[Mesh] (primary health care[MeSH Major Topic]) OR general practice [MeSH Major Topic]) OR primary care) AND high functioning practices

Additional key word searches included: 'high functioning practices; organisational attributes; general practice management; quality improvement model; frameworks; models; approaches; quality indicators; components; characteristics and organisational innovation'.

Study selection

Papers which presented or discussed organisational assessment or development tools, models or approaches and focused on organisational elements (eg. team-based care, communication, governance) of primary care were included. Those papers containing insufficient information about the elements of a reviewed tool or trial or where the tool could not be sourced were excluded from the study. Descriptive papers of models or frameworks designed exclusively for clinical program improvement (for a specific disease or health issue) were also excluded. Full Study selection criteria are listed in Appendix 2 (online at mja.com.au).

Data Collection Process

The titles and abstracts of identified studies were screened for relevance to the study questions. A screening assessment form based on exclusion and inclusion criteria was used to guide selection of relevant papers. Where there was any doubt as to the relevance of the study it remained in the list and reviewed by a second reviewer (TJ). Articles included during the initial screening by either reviewer underwent full-text screening. One reviewer (LC) developed and utilised a data extraction framework. Data extraction criteria are outlined below.

Data items

Data extracted from systematic reviews included definitions of organisational assessment or practice management; the tools included in the review; whether these were designed specifically for use in primary care settings or adapted for use in primary care settings; whether the tool was designed to be externally facilitated or internally led; the elements, domains or measures contained in the tools.

Data extracted from trials and surveys of tools used in primary care incorporated (i) the trial or survey methodology, data collection and validation methodologies (ii) the tool or tools assessed (iii) whether these were designed specifically for use in primary care settings or adapted for use in primary care settings (iii) whether the tool was designed to be externally

facilitated or internally led (iv) the elements or domains contained in each of tools (iii) results of the trial of the tool or the survey of tools used in general practice.

Data extracted from papers outlining the development of indicators, frameworks, models and approaches for practice assessment or in high functioning practices included (i) date of the research paper (ii) research question and/or hypothesis (iii) purpose of the research (iv) context of the research setting (v) theory used; where described (vi) methods (vii) key findings; including frameworks or models (viii) key elements, domains or characteristics described in relation to organisational assessment for quality improvement in primary health care. It also identified the current issues related to defining the elements of, and strategies to measure, organisational development and organisational assessment for the purposes of quality improvement in primary care.

Synthesis of results

An iterative process was used to identify (i) the commonly utilised tools in primary care settings (ii) the commonly represented elements or domains contained in each of these tools using systematic review; papers describing the trial of tools. A qualitative inductive thematic approach was used to explore the discussion sections of all papers; (surveys; trials; frameworks, models or approaches to organisational improvement or assessment) in order to explore information about the application and perceived impacts of tools and frameworks. Incorporating this information added further clarification, particularly of the relevance of identified elements to general practice settings.

Data were configured at the study level to allow for the inclusion of findings from a broad range of study types (systematic literature reviews, trials, frameworks, descriptive knowledge building papers and key informant discussions). Results were compared and combined to identify the elements of organisational assessment in primary health care which were integral to high quality practice performance.