

# Appendices

## Appendix 1: Example of a 2004–05 recording form

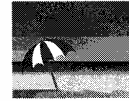


# Appendix 2: GP characteristics questionnaire 2004-05



The University of Sydney  
at Westmead Hospital

General Practice Statistics and  
Classification Unit  
Family Medicine Research Centre



a collaborating unit of the

Australian Institute of Health and Welfare

Doctor Identification Number

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Your QA No. \_\_\_\_\_

Please fill in boxes or circle answers

1. Sex ..... Male / Female
2. Age.....
3. How many years have you spent in general practice?.....
4. How many GPs work with you at this practice? .....   
(Practice = shared medical records)
5. Postcode of major practice address ..
6. Year of graduation .....
7. Place of graduation (primary medical degree):
  - Aust .....1
  - NZ.....2
  - Asia.....3
  - UK / Ireland .....4
  - Other: (specify) .....5
8. Do you conduct any of your consultations in a language other than English?
  - No ..... 1
  - Yes - <25% .....2
  - Yes - 25 to 50%.....3
  - Yes - >50% .....4
9. Are you a GP registrar (i.e. in training)?... Yes / No
10. Are you DVA registered? ..... Yes / No
11. Do you hold FRACGP ?..... Yes / No
12. Is your major practice accredited ? ..... Yes / No
13. Is there a practice nurse at your major practice address ?..... Yes / No
14. Number of general practice sessions you usually work per week?   
(1 session = ~4 hrs eg a morning session) ....
15. Direct patient care hours worked per week?   
(Include hours of direct patient care, instructions, counselling etc and other services such as referrals, prescriptions, phone calls etc.) ....

16. Over the past four weeks have you provided any patient care ....(Circle all that apply)

- As a locum ..... 1
- In a deputising service..... 2
- In a residential aged care facility..... 3
- As a salaried/sessional hospital medical officer .... 4

17. What are the normal after-hours arrangements for your practice? (Circle all that apply)

- Practice does its own .....1
- Co-operative with other practices .....2
- Deputising service .....3
- Referral to other service (eg A&E).....4
- Other .....5
- None .....6

18. Do you bulk bill? (Circle all that apply)

- Yes - all patients ..... 1
- Yes - Pension/Healthcare Card holders ..... 2
- Yes - children ..... 3
- Yes - selected other patients ..... 4
- No ..... 5

19. To what extent are computers used -

- |                             |                         |
|-----------------------------|-------------------------|
| (i) at your major practice? | (ii) by you (at work)?  |
| Not at all..... 1           | Not at all ..... 1      |
| Billing ..... 2             | Test ordering ..... 2   |
| Prescribing ..... 3         | Prescribing ..... 3     |
| Medical Records .... 4      | Medical Records ..... 4 |
| Other Admin ..... 5         | Internet ..... 5        |
| Internet / Email ..... 6    | Email ..... 6           |

(iii) Prescribing / Health record software used is \_\_\_\_\_

20. Is your major practice site a teaching practice? (Circle all that apply)

- for undergraduates..... 1
- for GP registrars ..... 2
- No ..... 3

21. Did any of your BEACH consultations take place in an Aboriginal Community Controlled Health Service (ACCHS)?

- No ..... 1
- Yes - all ..... 2
- Yes - some (which dates?) ..... 3

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Thank you for participating in the **BEACH PROGRAM**.

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### **Appendix 3: Code groups from ICPC-2 and ICPC-2 PLUS**

Available from <<http://www.aihw.gov.au/publications/index.cfm>>

### **Appendix 4: Chronic code groups from ICPC-2 and ICPC-2 PLUS**

Available from <<http://www.aihw.gov.au/publications/index.cfm>>

### **Appendix 5: Summary of annual results 2000–01 to 2004–05**

Available from <<http://www.aihw.gov.au/publications/index.cfm>>

### **Appendix 6: Published articles from the BEACH program**

Available from <<http://www.aihw.gov.au/publications/index.cfm>>