Questions about this form?

Email: quality@rnzcgp.org.nz

Quality programmes registration

To register for The Royal New Zealand College of General Practitioners' Quality programmes for the first time, general practices must complete this registration form. Please ensure that your responses are typed, not handwritten.

If you are uncertain whether you are registered already, email quality@rnzcgp.org.nz.

The Foundation Standard applies to a conventional general practice, involving a team, a physical site, enrolled patients, and various health care services such as diagnosis, treatment, continuity of care, promotion, prevention, screening and referrals. Contact the Quality team if unsure about eligibility, including for virtual practices or those without a team, physical site, or offering non-traditional services.

The Foundation Standard

- > Represents legislative, regulatory, and clinical requirements for all general practices in New Zealand
- > Mandatory for capitation funding under the PSAAP agreement
- > Once registered, practices receive an invoice and practice administration log-in details.

The Cornerstone programme

- > Optional modules (Continuous Quality Improvement and Equity) enhance Quality improvement
- > Completion of both modules (or evidence of working towards this) is a requirement to host a GPEP year 1 registrar
- > Modules can be purchased after completing the practice registration.

1. Practice details			
Practice name (name practice is known by):			
HPI Facility ID (please see list of Te Whatu Ora HPI Facility IDs here):			
Legal name of the practice or entity:			
Physical address of the practice:			
Postal address of the practice (if different to physical address):			
Primary Health Organisa	ation:		
District Health Board:			
Ownership structure:	Private	Corporate	Green Cross Health
	South Link Health	Tamaki Health	
	Other – please specify:		
Please tick any that apply:			
Self-identifies as a high-needs practice			
Rural hospital			
Very low cost access practice			
Self-identifies as a Māori health provider			
Self-identifies as a Pasifika health provider			

2. Contact details			
The primary contact is the main person who is responsible for coordinating the practice team and communicating with the Quality team.			
Name of primary contact:			
Email:			
Mobile phone number:			
The additional contact is the person whom the Quality team will contact if the primary contact is unavailable.			
Additional contact name:			
Additional contact email:			
Finance email is where invoices and finance-related queries will be sent:			
Finance email:			
3. On behalf of the practice			
Signature of applicant Date			
Printed name:			
Position:			

 ${\bf Please\ email\ your\ completed\ application\ to\ the\ Quality\ team:\ quality@rnzcgp.org.nz}$