[Service Letterhead]

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[Organisation Name]

Practice Manager Operational Guide & Responsibility Framework

Document Control

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1. Purpose of this guide

This operational guide has been developed to support the Practice Manager in effectively managing the daily operational, workforce, clinical governance, accreditation, compliance, and continuous quality improvement responsibilities of the Health Service.

This guide is intended to:

- support safe, culturally appropriate, and high-quality healthcare delivery
- strengthen operational consistency and accountability
- support accreditation readiness and compliance oversight
- provide practical operational guidance for new and existing Practice Managers
- support delegation and leadership development
- strengthen workforce coordination and clinic systems
- support proactive risk management and quality improvement activities

This guide should be read alongside:

- Position Description
- Clinical Governance Framework
- Medical Policy & Procedure Manual

- Delegations Manual
- Strategic Plan
- Workforce Policies
- CQI Framework
- Risk Management Framework

2. Role Overview

The Practice Manager role combines operational leadership, workforce management, clinical governance oversight, CQI coordination, accreditation management, and Registered Nurse clinical responsibilities.

The role requires balancing:

- operational management
- workforce leadership
- governance oversight
- service coordination
- clinical support
- accreditation readiness
- quality improvement activities
- community-focused service delivery

While some responsibilities may be delegated, the Practice Manager maintains accountability for ensuring systems are functioning safely, effectively, and in accordance with organisational and accreditation requirements.

3. Cultural Leadership Expectations

The Practice Manager plays a key role in supporting culturally safe, community controlled, and trauma-informed healthcare delivery across the Health Service. The role is expected to demonstrate leadership that respects Aboriginal culture, promotes community voice, and supports holistic approaches to health and wellbeing.

The Practice Manager is expected to:

- Support culturally safe, respectful, and inclusive healthcare environments for Aboriginal and Torres Strait Islander people.
- Uphold the principles of Aboriginal Community Control, self-determination, and community-led healthcare delivery.
- Promote respectful engagement with patients, families, community members, Elders, and partner organisations.
- Support holistic models of care that recognise the social, emotional, spiritual, cultural, and physical aspects of wellbeing.
- Foster a culturally safe and supportive workplace environment for Aboriginal staff and support Aboriginal workforce leadership and development.

- Recognise and value the cultural expertise of Aboriginal Health Workers, Aboriginal Health Practitioners, and Aboriginal staff within service delivery.
- Promote trauma-informed, compassionate, and person-centred approaches to care.
- Support culturally responsive communication and workplace practices across all areas of service delivery.
- Ensure organisational systems, policies, and quality improvement activities support culturally appropriate healthcare delivery and improved access for community members.
- Embed cultural safety principles within clinical governance, workforce management, continuous quality improvement, and service planning activities.

4. Role Prioritisation Framework

The Practice Manager is responsible for balancing operational, clinical, workforce, governance, and strategic responsibilities across the Health Service. The following priority framework is intended to support workload management, escalation, and decision-making within daily operations.

PRIORITY 1 — PATIENT SAFETY & CLINICAL RISK

Immediate action and escalation required.

Patient safety and clinical risk management must always remain the highest priority. The Practice Manager is responsible for ensuring systems are in place to support safe, effective, evidence-based, and culturally appropriate healthcare delivery.

Examples include:

- clinical emergencies or deteriorating patients
- medication incidents or prescribing concerns
- vaccine cold chain breaches
- infection control risks or exposure incidents
- significant workforce shortages impacting patient safety
- critical equipment failures
- child protection concerns
- abnormal results not actioned appropriately
- unsafe clinical practices or scope of practice concerns
- aggressive or high-risk patient presentations
- emergency response coordination

The Practice Manager must ensure:

- risks are escalated promptly
- incidents are documented and investigated appropriately
- immediate corrective actions are implemented
- staff are supported during high-risk situations
- patient safety remains central to operational decision-making

PRIORITY 2 — CLINIC OPERATIONS

Maintain safe and effective day-to-day clinic function.

The Practice Manager is responsible for coordinating operational systems to ensure the clinic functions efficiently and patients are able to access appropriate care in a timely and culturally safe manner.

Examples include:

- staffing and roster gaps
- GP and clinician coverage issues
- patient flow pressures and excessive wait times
- outreach coordination
- appointment availability and scheduling
- reception workflow issues
- pathology or allied health coordination issues
- room allocation and clinic space management
- consumable stock or equipment shortages
- transport and patient access barriers
- coordination of visiting services and specialists

The Practice Manager should:

- maintain oversight of daily clinic operations
- proactively manage operational pressures
- support efficient patient flow and communication
- coordinate staffing and clinic resources appropriately
- ensure operational issues are addressed before impacting service delivery

PRIORITY 3 — GOVERNANCE & COMPLIANCE

Support safe, accountable, and accreditation-ready service delivery.

The Practice Manager plays a key role in ensuring organisational systems align with accreditation standards, legislative requirements, clinical governance frameworks, and organisational policies and procedures.

Examples include:

- accreditation preparation and evidence collection
- audit completion and follow-up actions
- mandatory reporting requirements
- policy and procedure reviews
- staff credentialing and mandatory training compliance

- incident investigations and risk management
- continuous quality improvement activities
- infection control monitoring
- documentation and data integrity reviews
- risk register updates
- clinical governance committee actions
- compliance with Medicare and program requirements

The Practice Manager should:

- maintain ongoing accreditation readiness
- ensure governance systems remain current and effective
- support continuous quality improvement activities
- monitor compliance risks proactively
- ensure reporting obligations are completed within required timeframes

PRIORITY 4 — STRATEGIC & IMPROVEMENT WORK

Support long-term service sustainability, quality improvement, and community outcomes.

In addition to daily operations, the Practice Manager contributes to strategic planning, service development, workforce sustainability, and organisational improvement activities that strengthen service delivery and community outcomes.

Examples include:

- workforce planning and succession planning
- strategic projects and service development
- health promotion initiatives
- community engagement activities
- system and workflow improvements
- service redesign and expansion
- program development and evaluation
- strengthening culturally responsive models of care
- improving patient access and continuity of care
- supporting innovation and new service initiatives
- strengthening partnerships and collaboration opportunities

The Practice Manager should:

- contribute to long-term service planning and sustainability
- identify opportunities for operational and clinical improvement
- support innovation and continuous improvement activities
- strengthen systems that improve patient and community outcomes
- support organisational growth while maintaining culturally safe and high-quality healthcare delivery

5. Daily Operational Responsibilities

The Practice Manager is responsible for maintaining oversight of daily clinic operations and supporting safe, effective, and culturally appropriate service delivery across the Health Service.

Daily responsibilities may include:

☐ Maintain oversight of staffing coverage, clinic capacity, patient flow, and operational pressures impacting service delivery.

☐ Deliver daily team huddles to support communication, escalation of concerns, coordination of clinic activities, and identification of high-risk patients or operational issues.

☐ Provide visible leadership and operational support to clinical, reception, and outreach teams throughout the day.

☐ Monitor workforce issues, staff wellbeing concerns, and operational risks requiring escalation or follow-up.

☐ Maintain oversight of delegated clinical safety systems including:

- vaccine management,
- infection control,
- emergency equipment processes,
- recalls and reminders,
- pathology workflows,
- and room readiness.

☐ Ensure significant incidents, patient safety concerns, complaints, or operational issues are appropriately escalated, documented, and followed up.

☐ Support effective communication across clinical, administration, reception, allied health, and visiting provider teams.

☐ Monitor service accessibility, culturally safe service delivery, and patient experience across all areas of the clinic.

☐ Maintain oversight of urgent operational communications, health alerts, and priority follow-up items requiring action or delegation.

☐ Provide clinical support where operationally required, while maintaining primary focus on leadership, coordination, governance, and operational oversight.

6. Weekly Responsibilities

☐ Review staffing, leave trends, and workforce capacity concerns.

☐ Conduct staff check-ins, supervision, or operational support meetings as required.

☐ Review incidents, complaints, and operational risks requiring follow-up or escalation.

☐ Review recall systems, high-risk patient follow-up processes, and chronic disease management activities.

☐ Monitor delegated clinical governance activities including infection control, vaccine management, emergency preparedness, and equipment maintenance.

☐ Review stock, consumables, and operational resource requirements.

☐ Meet with Clinical Lead and relevant staff regarding clinic operations, workforce issues, patient flow concerns, and service delivery priorities.

☐ Monitor progress of CQI activities, audits, accreditation actions, and outstanding operational tasks.

7. Monthly Responsibilities

☐ Attend and/or chair Clinical Governance, Practice Team, Management, and other relevant organisational meetings.

☐ Review workforce performance, staffing pressures, overtime trends, leave balances, and workforce development needs.

☐ Review incident trends, complaints, patient feedback, and identified operational or clinical risks requiring follow-up or escalation.

☐ Monitor KPI performance, program deliverables, Medicare activities, and operational reporting requirements to ensure funding and compliance obligations are being met.

☐ Prepare and/or submit monthly reports to the CEO and relevant committees, including operational updates, workforce issues, incident trends, CQI activities, program performance, and identified risks impacting service delivery.

☐ Review progress of accreditation activities, policy reviews, CQI actions, audit schedules, and outstanding compliance requirements.

☐ Monitor risk registers, governance actions, compliance obligations, and operational risks relevant to clinic operations and patient safety.

☐ Review service delivery pressures, patient access issues, clinic utilisation, and opportunities for operational improvement or system strengthening.

☐ Support workforce development, mentoring, supervision, and professional development activities across clinical, administration and reception teams.

8. Annual Responsibilities

☐ Support organisational accreditation preparation, evidence collection, mock audit activities, and ongoing accreditation readiness across all areas of clinic operations and clinical governance.

☐ Coordinate annual review of key policies, procedures, and operational systems relevant to clinical governance, infection control, medication safety, emergency preparedness, workforce management, and service delivery.

☐ Participate in organisational strategic planning, workforce planning, succession planning, and service development activities to support sustainable and culturally appropriate healthcare delivery.

☐ Coordinate annual staff performance reviews, supervision processes, professional development planning, and review of workforce capability and training needs.

☐ Coordinate and contribute to annual program evaluation activities to assess service effectiveness, community outcomes, program deliverables, utilisation trends, and opportunities for service improvement.

☐ Coordinate or oversee annual clinical competency assessments for relevant staff, including review of:

- infection control practices,
- emergency response processes,
- vaccine management,
- medication safety,
- clinical equipment use,
- and scope of practice requirements.

☐ Coordinate annual vaccine storage and cold chain self-audits in accordance with the National Vaccine Storage Guidelines (Strive for 5) and organisational vaccine management requirements.

☐ Review annual infection prevention and control systems, emergency preparedness procedures, business continuity processes, and WHS requirements to ensure operational readiness and patient safety.

☐ Review operational priorities, service delivery outcomes, patient access issues, and continuous quality improvement activities to identify opportunities for system improvement and service strengthening.

☐ Review annual incident trends, complaints, patient feedback, audit outcomes, and identified risks to support quality improvement and risk reduction activities.

☐ Support preparation and contribution to the organisation's Annual Report, including provision of operational updates, program achievements, workforce initiatives, quality improvement activities, and service delivery outcomes.

☐ Review accreditation actions, governance requirements, risk registers, and compliance obligations to ensure ongoing alignment with RACGP Standards, NSQHS Standards, funding requirements, and organisational expectations.

☐ Coordinate annual review of recall and reminder systems, chronic disease management activities, data quality processes, and clinical documentation practices.

☐ Review service agreements, outreach activities, visiting provider arrangements, and partnership activities to support effective and coordinated service delivery.

☐ Support annual planning and review of health promotion activities, community engagement initiatives, and culturally responsive service delivery programs.

☐ Participate in annual budgeting, resource planning, equipment replacement planning, and identification of operational priorities relevant to clinic services and workforce needs.

9. As Required / Periodic Responsibilities

☐ Respond to significant incidents, emergencies, outbreaks, or patient safety concerns.

☐ Coordinate recruitment, onboarding, orientation, and workforce transition activities.

☐ Manage workforce performance concerns, grievances, conflict resolution, and disciplinary processes in consultation with management and HR.

☐ Coordinate responses to accreditation findings, audits, investigations, or compliance concerns.

☐ Support implementation of new programs, service changes, operational systems, or strategic initiatives.

☐ Participate in community events, health promotion activities, outreach activities, and culturally significant events where appropriate.

☐ Support organisational responses to community issues, Sorry Business, critical events, or emerging health priorities.

☐ Coordinate operational responses to public health alerts, workforce shortages, or service disruptions.

10. Escalation and Reporting Requirements

The Practice Manager must ensure appropriate escalation and reporting of:

Matter Requiring Escalation	Potential Escalation / Reporting Pathway
Significant clinical incidents or patient safety events	CEO, Clinical Governance Committee, relevant clinician, insurer, external regulatory bodies where required
Child protection concerns	CEO, relevant safeguarding procedures, Child Protection Helpline, NSW Police where required
Medication incidents or medication safety concerns	CEO, prescribing clinician, Clinical Governance Committee, relevant regulatory authority if required
Vaccine cold chain breaches	CEO, Public Health Unit, NSW Health Vaccine Centre, relevant reporting requirements
Infection control exposures or outbreaks	CEO, Infection Control Lead, Public Health Unit, Clinical Governance Committee
Workforce shortages impacting safe service delivery	CEO, Management Team, workforce escalation processes
Serious complaints or aggressive incidents	CEO, Clinical Governance Committee, HR/WHS processes where applicable
WHS incidents, hazards, or staff injuries	CEO, WHS reporting systems, SafeWork NSW where required
Privacy breaches or data security incidents	CEO, Privacy Officer, IT provider, OAIC notification processes where required
Accreditation or compliance risks	CEO, Clinical Governance Committee, accreditation body, funding bodies where required
Business continuity risks or operational disruptions	CEO, Management Team, Business Continuity processes

Mandatory reporting concerns relating to registered clinicians	CEO, AHPRA notification processes where legislatively required
Medicare compliance or billing concerns	CEO, Finance Team, Medicare compliance reporting processes
Public health alerts or emerging health risks	CEO, Public Health Unit, relevant health authorities

The Practice Manager should ensure:

- incidents and concerns are documented appropriately,
- escalation occurs within required timeframes,
- staff are supported throughout escalation and investigation processes,
- corrective actions are implemented and monitored,
- and communication pathways remain clear and consistent across teams.

All escalation and reporting activities should align with organisational policies, legislative obligations, clinical governance frameworks, and relevant accreditation standards.

11. Key Operational Monitoring Areas

The Practice Manager is responsible for maintaining oversight of key operational, workforce, clinical governance, and service delivery indicators to support safe, effective, culturally appropriate, and sustainable healthcare delivery.

Routine monitoring supports:

- early identification of operational or clinical risks,
- accreditation and compliance readiness,
- continuous quality improvement activities,
- workforce planning,
- and ongoing service improvement.

The Practice Manager should routinely monitor and review the following areas:

Monitoring Area	Examples of Monitoring Activities
Clinic Access & Service Delivery	Appointment utilisation, patient wait times, same-day appointment availability, cancellations, patient flow pressures, outreach attendance, and accessibility barriers impacting service delivery.
Patient Safety & Clinical Governance	Incident trends, near misses, medication incidents, infection control concerns, emergency preparedness, cold chain

	compliance, abnormal result follow-up, and escalation of high-risk patient concerns.
Recalls & Chronic Disease Management	Recall and reminder completion rates, overdue recalls, chronic disease reviews, care planning activity, preventative health activities, and follow-up processes for high-risk patients.
Workforce Management	Workforce vacancies, absenteeism trends, overtime usage, staff wellbeing concerns, roster pressures, mandatory training compliance, supervision requirements, and workforce capability needs.
Patient Experience & Cultural Safety	Patient complaints, feedback, patient experience trends, culturally safe service delivery concerns, communication issues, and barriers impacting patient engagement or access to care.
Accreditation & Compliance	Progress of accreditation actions, audit completion, policy review schedules, mandatory reporting requirements, risk register actions, and compliance with organisational and legislative requirements.
CQI & Audit Activities	Continuous quality improvement activities, clinical audits, program evaluation activities, quality indicators, audit outcomes, and implementation of corrective actions or improvement initiatives.
Clinical Information & Data Quality	Accuracy of clinical documentation, data integrity, recall system performance, Medicare billing compliance, MBS utilisation, reporting accuracy, and clinical information system management.
Program Performance & Funding Deliverables	Program activity, KPI achievement, outreach activities, funded service delivery requirements, utilisation trends, and reporting obligations linked to funding agreements.
Operational & Resource Management	Consumable stock usage, equipment maintenance requirements, operational pressures, clinic utilisation, visiting provider coordination, and identification of service delivery risks or resource gaps.

12. Delegations and Oversight

The Practice Manager maintains overall accountability for clinic operations, workforce management, clinical governance, accreditation readiness, risk management, and compliance activities across the Health Service.

While routine operational and clinical tasks may be delegated to the Clinical Lead or other appropriately trained staff, the Practice Manager remains responsible for ensuring systems are functioning safely, effectively, and in accordance with organisational and accreditation requirements.

Delegation Principles

The Practice Manager should:

- delegate routine operational and clinical activities appropriately
- maintain visibility over clinic operations and workforce pressures
- avoid becoming responsible for all routine clinical tasks
- support accountability across all team members
- ensure staff understand their delegated responsibilities
- maintain regular communication with the Clinical Lead and relevant staff

Examples of Tasks That May Be Delegated

Delegated to Clinical Lead / Designated Staff	Practice Manager Oversight Required
Daily nursing workflow coordination	Monitoring overall clinic operations
Vaccine fridge monitoring	Escalation of cold chain breaches
Infection control monitoring	Oversight of infection control systems
Room readiness and stock checks	Monitoring operational risks or recurring issues
Recall and reminder follow-up	Oversight of high-risk recalls and patient safety concerns
Routine audits and data collection	Review of audit outcomes and corrective actions
Orientation support for new staff	Workforce capability and supervision oversight

The Practice Manager Remains Responsible For

- clinical governance oversight
- workforce leadership and supervision
- accreditation readiness and compliance
- operational coordination

- risk management and escalation
- performance management processes
- monitoring of delegated activities
- organisational reporting requirements
- continuous quality improvement activities

Escalation to the Practice Manager

The Clinical Lead and other staff should escalate:

- significant incidents or near misses
- patient safety concerns
- medication or vaccine management concerns
- infection control breaches
- workforce or conduct concerns
- staffing pressures impacting service delivery
- repeated non-compliance
- accreditation or compliance concerns
- operational issues impacting safe care delivery

Leadership Approach

The Practice Manager should foster a collaborative leadership approach that supports:

- clear communication,
- shared accountability,
- culturally safe practice,
- professional development,
- and continuous quality improvement across all areas of the Health Service.