



General Practice After Hours Program

Division of General Practice Consultation Form

APPLICANT TO COMPLETE

Applicant's Details:

Applicant Name:	<input type="text"/>
Legal Entity Name:	<input type="text"/>
ABN:	<input type="text"/>
Project Manager:	<i>Please include full name and title</i>
Phone Number:	<input type="text"/>
Fax Number	<input type="text"/>

Note: Applicants should submit their completed and signed consultation form to the Department of Health and Ageing along with their application.

Brief summary of funding proposal:

*Applicant to provide a brief summary of the GP after hours service for which they are applying for Commonwealth funding under the General Practice After Hours Program. **Please delete this message before completion***

DIVISION TO COMPLETE

Division of General Practice Details:

Division Name:

Contact:

Please include full name and title

Phone Number:

The General Practice After Hours Program aims to ensure that as many people as possible have access to quality GP services when they need them. It does this by providing grants to support the viability of existing after hours primary medical care services, as well as those normal hour services wishing to extend their hours of operation into the after hours period. Two overriding requirements to be eligible for funding under the Program are that Commonwealth funding of the after hours service:

1. has the support of the local GP community; and
2. does not create unfair competition with existing providers of after hours services in the local area.

In order for the applicant to demonstrate compliance with these requirements, your Division of General Practice is asked to complete, sign and return this consultation form to the applicant as soon as possible. The completion of this form is a mandatory requirement for the applicant to be considered for funding under the General Practice After Hours Program.

Full copies of the General Practice After Hours Program Guidelines can be found on the Australian Department of Health and Ageing website, www.health.gov.au/tenders.

Please provide responses to the following questions.

- 1. Does the Division intend to apply for a separate grant under the General Practice After Hours Program and/or is the Division currently in receipt of a grant(s) under the *After Hours Primary Medical Care* or *Round the Clock Medicare: Investing in After Hours GP Services* programs? If yes, please provide details**

2. Is there a community need for the proposed after hours service in the local area?

Please comment on the need for maintaining or extending after hours services in the local area. Please delete this message before completion

3. What after hours services (other than the service above) currently exist or are planned in the local area?

Please include details on the number and proximity (relative to the proposed service) of other after hours services in the local area. Please delete this message before completion

4. Would Commonwealth funding of this after hours service create unfair competition with other existing providers of after hours services in the local area? If so, how?

For the service to be eligible for funding under the program, it is a requirement that Commonwealth funding of the after hours does not create unfair competition with existing providers of after hours services. Please delete this message before completion

5. Is there local GP support for this after hours service? If not, what do you see as being the main issues?

For the service to be eligible for funding under the program, it is a requirement that the after hours service has the support of the local GP community. Please delete this message before completion.

6. Do you see any major workforce issues or any other barriers that would restrict the applicant from providing a quality after hours service?

7. Do you have any other comments you wish to add in relation to this proposal?

**CEO/ Deputy
CEO:**

Please include full name and title

**CEO / Deputy
CEO Signature:**

Date: