



Previous exceptional circumstances reviews and outcomes

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
NSW	Richmond-Windsor	Granted	<p>The DPA status of Richmond-Windsor was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none">• many areas are still semi-rural• massive population growth• closure of after-hours services• Primary Health Network (PHN) advice that 16 practices have been unable to fill vacancies over five years. <p>DPA status is granted until the next DPA update on 1 July 2022, effective from the date of publication of this outcome (24 March 2022).</p>
NSW	Pottsville	Granted	<p>The DPA status of Pottsville was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none">• The impact of recent flooding events are recent exceptional circumstances impacting on GP services access.• 33 per cent of services in the Pottsville catchment are delivering to people living outside the catchment, with neighbouring catchments also affected by recent floods.• There has been a decline in GP services over the last 12 months. However, the catchment remains above the MM2 benchmark for a comparable population.

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			<ul style="list-style-type: none"> Pottsville has an ageing population with 13 per cent of the population aged over 70, above the national average (11 per cent). <p>The GP catchment of Pottsville will be classified as DPA until the next update in mid-2023, effective from the date of publication of this outcome.</p>
NSW	Blacktown - North	Not granted	<p>The DPA status of Blacktown - North was considered by the DWG. The following factors were considered:</p> <p>While there is evidence of increased patient demand, the catchment maintains significantly higher levels of GP services access compared to the average of MM2 areas.</p> <ul style="list-style-type: none"> The GP FTE per 1000 patients in Blacktown - North is 1.4 compared to a MM2 average of 1.1 The GP FTE and number of GPs in the catchment has increased since 2017 meaning the net level of service access across the catchment has been meeting the increased patient demand. <p>A change of DPA status is not supported as the catchment is well serviced in terms of GP FTE and services per capita.</p>
NSW	Singleton	Granted	<p>On 24 November 2021, the DPA status of Singleton was assessed by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> an overall loss of GPs in the catchment which have not been able to be replaced high demand for GP services from patients living outside of the GP catchment the ageing GP workforce in Singleton.

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			DPA status is granted until the next update on 1 July 2022, effective from the publication of this outcome (7 December 2021).
NSW	Nowra–Bomaderry	Granted	<p>On 24 November 2021, the DPA status of Nowra–Bomaderry was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> the low number of full-time equivalent GP FTE compared to the GP headcount the high needs and vulnerable populations. <p>DPA status is granted until the next DPA update on 1 July 2022, effective from the publication of this outcome (7 December 2021).</p>
NSW	Kurri Kurri–Cessnock	Granted	<p>On 8 December 2021, the DWG considered applications from MM 3 and MM 4 locations, noting the Government’s decision to extend ongoing automatic DPA status to these locations from 1 January 2022.</p> <p>Ongoing DPA status is granted to these catchments, effective from the publication of this outcome (17 December 2021).</p>
NSW	Port Macquarie	Granted	<p>On 8 December 2021, the DWG considered applications from MM 3 and MM 4 locations, noting the Government’s decision to extend ongoing automatic DPA status to these locations from 1 January 2022.</p> <p>Ongoing DPA status is granted to these catchments, effective from the publication of this outcome (17 December 2021).</p>
NSW	Lithgow	Granted	<p>On 8 December 2021, the DWG considered applications from MM 3 and MM 4 locations, noting the Government’s decision to extend ongoing automatic DPA status to these locations from 1 January 2022.</p>

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			Ongoing DPA status is granted to these catchments, effective from the publication of this outcome (17 December 2021).
NSW	Sussex Inlet	Granted	<p>On 8 December 2021, the DWG considered applications from MM 3 and MM 4 locations, noting the Government's decision to extend ongoing automatic DPA status to these locations from 1 January 2022.</p> <p>Ongoing DPA status is granted to these catchments, effective from the publication of this outcome (17 December 2021).</p>
NSW	Broken Hill–Tibooburra	Granted	<p>On 8 December 2021, the DWG considered applications from MM 3 and MM 4 locations, noting the Government's decision to extend ongoing automatic DPA status to these locations from 1 January 2022.</p> <p>Ongoing DPA status is granted to these catchments, effective from the publication of this outcome (17 December 2021).</p>
NSW	Narrabri	Granted	<p>On 8 December 2021, the DWG considered applications from MM 3 and MM 4 locations, noting the Government's decision to extend ongoing automatic DPA status to these locations from 1 January 2022.</p> <p>Ongoing DPA status is granted to these catchments, effective from the publication of this outcome (17 December 2021).</p>
NSW	Tumut–Adelong	Granted	<p>On 8 December 2021, the DWG considered applications from MM 3 and MM 4 locations, noting the Government's decision to extend ongoing automatic DPA status to these locations from 1 January 2022.</p> <p>Ongoing DPA status is granted to these catchments, effective from the publication of this outcome (17 December 2021).</p>

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NSW	Young	Granted	<p>On 8 December 2021, the DWG considered applications from MM 3 and MM 4 locations, noting the Government's decision to extend ongoing automatic DPA status to these locations from 1 January 2022.</p> <p>Ongoing DPA status is granted to these catchments, effective from the publication of this outcome (17 December 2021).</p>
NSW	Wyong-Gorokan	Granted	<p>On 12 January 2022, the DPA status of Wyong-Gorokan was considered by the DWG. The following factors were considered in granting DPA status:</p> <ul style="list-style-type: none"> • loss of GPs and the residual GP workforce approaching retirement age • high level of patients seeking services from adjacent catchments • support of the Primary Health Network • lower socio-economic status and high elderly population in the catchment. <p>DPA status is granted until the next DPA update on 1 July 2022, effective from the date of publication of this outcome (4 February 2022).</p>
NSW	Toukley-Budgewoi	Granted	<p>On 12 January 2022, the DPA status of Toukley-Budgewoi was considered by the DWG. The following factors were considered in granting DPA status:</p> <ul style="list-style-type: none"> • number of practices in the catchment experiencing workforce issues • issues with service accessibility with high numbers of patients seeking GP services out of the catchment • high proportion of the elderly and vulnerable populations. • support of the Primary Health Network. <p>DPA status is granted until the next DPA update on 1 July 2022, effective from the date of publication of this outcome (4 February 2022).</p>

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NSW	Newcastle	Not granted	<p>The DPA status of Newcastle was considered by the DWG. Firstly, the DWG notes that Newcastle is currently a DPA for Bonded Medical Program (BMP) participants, giving practices in the catchment access to a broader pool of doctors from which to recruit than would otherwise be available. In summary:</p> <ul style="list-style-type: none"> • there is increasing demand for GP services from patients as a result of population growth • data shows there are stable GP FTE levels within the catchment, and a GP FTE per 1000 figure above the average in MM2 locations. <p>While some indicators show the catchment could benefit from DPA status, there are other indicators that still show this catchment as having access to GP services in line with or better than the MM2 average. The catchment of Newcastle will remain non-DPA until further assessment within the next DPA update on 1 July 2022.</p>
NSW	Maitland	Granted	<p>The DPA status of Maitland was assessed by the DWG.</p> <p>DPA status is supported for the MM1 outer metropolitan areas of the catchment. While the catchment is well serviced in terms of GP FTE and services per capita, the area will benefit from additional recruitment options alongside the growing population and changing health services profile in the area.</p> <p>DPA status is granted until the next DPA update on 1 July 2022, effective from the date of publication of this outcome (4 February 2022).</p>
NSW	Blacktown	Not granted	<p>The DPA status of Blacktown was considered by the DWG. This catchment contains areas which are classified 'inner metropolitan' and 'outer</p>

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			<p>metropolitan', though the applicant's practice falls in an 'outer metropolitan' location. The DWG considered the following factors:</p> <ul style="list-style-type: none"> • there is evidence of increased patient demand, however the catchment maintains significantly higher levels of GP services access compared to the average in MM2 areas. • GP FTE is 1.6 compared to a MM2 average of 1.1. Overall, the GP FTE and number of GPs in the catchment has increased since 2017 meaning the net level of service access across the catchment has been meeting increased demand. • the DPA indicator value for the catchment is significantly higher than the national benchmark for GP services levels. <p>A change to DPA status is not supported as the catchment is well serviced in terms of GP FTE and services per capita.</p>
NSW	Campbelltown	Not granted	<p>The DPA status of Campbelltown was considered by the DWG. This catchment contains areas which are classified 'inner metropolitan' and 'outer metropolitan'. The applicant practices are in an 'outer metropolitan' location. The DWG considered the following factors:</p> <ul style="list-style-type: none"> • while there is evidence of increased patient demand, the catchment maintains significantly higher levels of GP services access compared to the average in MM2 areas. • the GP FTE in Campbelltown is significantly higher compared to a MM2 average, meaning the net level of services access across the catchment has been meeting increased demand. <p>A change to DPA status is not supported as the catchment is well serviced in terms of GP FTE and services per capita.</p>

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NSW	Morisset-Cooranbong	Granted	<p>The DPA status of Morisset-Cooranbong was considered by the DWG. The following factors were considered in making a decision to grant DPA status to this catchment including:</p> <ul style="list-style-type: none"> • data shows that the GP FTE of the GP catchment of Morisset-Cooranbong has decreased by 19 per cent since 2017. • patient access to services has also decreased as seen by the reduction of GPT FTE per 1000 patients to 1.1 (from 1.5 in 2017), and services per capita reducing from 8.2 in 2017 to 6.4 (below the average MM2 benchmark of 6.5) in 2020. • demographic data shows a higher than the national average of elderly and Aboriginal and Torres Strait Islander population who may experience more complex health requirements. • a high proportion of GP population over the age of 55 and the potential for retirement in the next 12 months. <p>The Morisset-Cooranbong catchment will become DPA until the next update (1 July 2022), effective from the publication of this outcome (15 February 2022).</p>
NSW	Camden	Not granted	<p>The DPA status of Camden was assessed by the DWG. The DWG considered the following factors:</p> <ul style="list-style-type: none"> • the catchment maintains significantly higher levels of GP services access compared to the average in MM2 areas. • the number of GPs has increased in the last few years. • the GP FTE in Camden is significantly higher compared to a MM2 average, meaning the net level of service access across the catchment has been meeting the increased demand.

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			A change to DPA status is not supported as the catchment is well serviced in terms of GP FTE and services per capita.
NSW	Penrith	Not granted	<p>The DPA status of Penrith was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> • while there is evidence of increased patient demand, the catchment maintains significantly higher levels of GP services access compared to the average in MM2 areas. • The GP FTE in Penrith is 1.4 and comparable to the MM2 national average of 1.1. • Overall, the GP FTE and number of GPs in the catchment has increased since 2017 meaning the net level of service access across the catchment has been meeting increased demand. <p>A change to DPA status is not supported as the catchment is well serviced for population growth, GP FTE and services per capita.</p>
NSW	Bringelly-Green Valley	Not granted	<p>The DPA status of Bringelly-Green Valley was considered by the DWG. This catchment contains areas which are classified 'inner metropolitan' and 'outer metropolitan', though the applicant's practice falls in an 'outer metropolitan' location. The following factors were considered:</p> <ul style="list-style-type: none"> • while there is evidence of increased patient demand, the catchment maintains levels of GP services access at or above the average in MM2 areas. • there has been 16 per cent population growth across the catchment since 2017. • the GP FTE per 1,000 patients (1.2) is in-line with the MM2 benchmark (1.1).

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
			<ul style="list-style-type: none"> overall, the GP FTE has increased substantially since 2017 meaning the net level of services access across the catchment has been meeting increased demand. <p>A change to DPA status is not supported as the catchment is receiving adequate services in terms of GP FTE and services per capita across the catchment.</p>
NSW	Port Kembla	Not granted	<p>The DPA status of Port Kembla was considered by the DWG with evidence submitted by the applicant. The following factors were considered:</p> <ul style="list-style-type: none"> while there is evidence of increased patient demand, the catchment maintains significantly higher levels of GP services access compared to the average in MM2 areas. the population remains relatively stable across the catchment increasing by less than 1 per cent since 2019. the GP FTE in Port Kembla is 1.3 compared to the MM2 average of 1.1. The GP FTE has increased since 2017 meaning the net level of service access across the catchment has been meeting increased demand. The DPA indicator value for the catchment is significantly higher than the national benchmark for GP services levels <p>The catchment of Port Kembla will remain non-DPA until it is again service tested as part of the annual DPA update scheduled for 1 July 2022.</p>
NSW	Picton-Bargo	Not granted	<p>On 22 December 2021, the DPA status of the Picton-Bargo catchment was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> GP FTE has risen steadily over the past four years. The GP FTE per 1000 patients is well above the MM2 average.

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			Picton-Bargo appears to be a well serviced area when compared to other communities. The Picton-Bargo catchment will remain non-DPA until it is again service tested as part of the annual DPA update scheduled for 1 July 2022.
NSW	Katoomba-Springwood	Granted	<p>On 27 January 2022, the DPA status of Katoomba-Springwood was considered by the DWG. The following factors were considered in granting DPA status:</p> <ul style="list-style-type: none"> • data shows sequential falls of service against benchmarks • evidence of an ageing GP workforce and retirement • significant increases in demand for mental health services following the bushfire disaster and responses to COVID-19 • established patient loads saturating GP practices • high numbers of retirees in the catchment. <p>DPA status is granted until the next DPA update on 1 July 2022, effective from the date of publication of this outcome (21 February 2022).</p>
NSW	Douglas Park-Appin	Granted	<p>The DPA status of Douglas Park-Appin GP catchment was considered by the DWG. The catchment of Douglas Park-Appin is classified MM2. The following factors were considered:</p> <ul style="list-style-type: none"> • the low number of GP FTE compared to the GP headcount • high demand for GP services from patients living outside of the GP catchment • the proportion of GP workforce over 55 seeking to retire or at least wind down services provided, combined with recent GP losses.

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			DPA status is granted until the next DPA update on 1 July 2022, effective from the publication of this outcome (15 March 2022).
NSW	Tweed Heads	Granted	<p>The DPA status of Tweed Heads was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> the exodus of Qld based GPs due to Covid-19 border closures and failure to return after borders were re-opened impact of recent flooding events and the need to provide continuity at a time of rebuilding the workforce. <p>DPA status is granted until the next DPA update on 1 July 2022, effective from the date of publication of this outcome (15 March 2022).</p>
NSW	Kincumber-Box Head	Granted	<p>The DPA status of Kincumber-Box Head was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> comparison data demonstrates that despite the minimal increasing population of under 0.1 percent, the GP FTE per 1000 patients (0.6), the GP services per capita (3.5) and net loss of GPs (-8) demonstrates that the catchments service level is below the MM2 benchmark average and that current service levels may not be meeting demand. there is an aging GP population with forecast GP retirements. the GP catchment's demographics points to higher than the national average levels for the elderly population. <p>DPA status is granted until the next DPA update on 1 July 2022, effective from the date of publication of this outcome (15 March 2022).</p>

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NSW	Mount Druitt	Not Granted	<p>The DPA status of Mount Druitt was considered by the DWG. The DWG considered the following factors:</p> <ul style="list-style-type: none"> the GP FTE per 1,000 patients is higher than the national average the ratio of VR to non-VR doctors is significantly higher than the national average, indicating that access to GPs in this catchment is above the benchmark. <p>A change to the current non-DPA status for Mount Druitt is not supported based on the evidence provided. The catchment is well serviced in terms of GP FTE and services per capita.</p>
NSW	Bateau Bay – The Entrance	Not Granted	<p>The DPA status of Bateau Bay – the Entrance was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> increasing demand for GP services from patients, including from patients from vulnerable populations. an inability to recruit GPs, resulting in increased pressure on the remaining GPs. <p>On balance, a change to DPA status is not supported. The catchment is well serviced in terms of GP FTE and services per capita and the PHN should continue to support applicant practices with recruitment concerns.</p>
NSW	Lake Macquarie	Granted	<p>The DPA status of Lake Macquarie was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> more than 50% of emergency departments with category 4 and 5 cases as the GP workforce drops an ageing GP workforce

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			<ul style="list-style-type: none"> 19.8% growth in the aged population aged over 70 years. <p>DPA status is granted until the next DPA update on 1 July 2022, effective from the date of publication of this outcome (24 March 2022).</p>
QLD	Maroochy	Not granted	<p>The DPA classification of Maroochy was considered by the DWG.</p> <p>The following factors were considered:</p> <ul style="list-style-type: none"> The assessment against the DPA benchmark has increased from 10 per cent above benchmark in 2021 to 11 per cent above the benchmark in 2022, indicating an increase in GP services access. The total number of GPs working in the catchment has increased between 2017-18 (130) and 2020-21 (153). The GP FTE per 1000 residents is higher (1.5 in 2020-21) than the MM2 average (1.1). <p>A change of DPA classification is not supported as the catchment is well serviced in terms of GP FTE and services per capita.</p>
QLD	Loganlea-Carbrook	Not granted	<p>The DPA status of Loganlea-Carbrook was considered by the DWG.</p> <p>The following factors were considered:</p> <ul style="list-style-type: none"> The assessment against the DPA benchmark has increased over the last four updates from 17 per cent above benchmark in 2019 to 21 per cent above the benchmark in 2022, indicating an increase in GP service levels. The total number of GPs working in the catchment has increased between 2017-18 (117) and 2020-21 (128).

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			<ul style="list-style-type: none"> The GP FTE per 1000 residents is higher (1.4 in 2020-21) than the MM2 average (1.1). <p>A change of DPA classification is not supported as the catchment is well serviced in terms of GP FTE and services per capita.</p>
QLD	Southport	Not granted	<p>The DPA classification of Southport was considered by the DWG.</p> <p>The following factors were considered:</p> <ul style="list-style-type: none"> Population in the catchment has been relatively stable over four years to 2020-21. GP FTE has remained stable and GP FTE per 1000 residents (1.7) is significantly higher than the MM2 average (1.1). This catchment was assessed as 17 per cent above the benchmark in the 2022 DPA update. There is no evidence of significantly disadvantaged or vulnerable populations in this catchment, though the elderly population is slightly higher than the MM2 average (12.6% against 11%). <p>A change to DPA status is not supported as the catchment is well serviced in terms of GP FTE and services per capita.</p>
QLD	Surfers Paradise	Not granted	<p>The DPA classification of Surfers Paradise was considered by the DWG.</p> <p>The following factors were considered:</p> <ul style="list-style-type: none"> The assessment against the DPA benchmark has increased from 3 per cent above benchmark in 2021 to 4 per cent above the benchmark in 2022, indicating a minor increase in services levels.

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			<ul style="list-style-type: none"> The GP FTE per 1000 residents ratio in Surfers Paradise (1.5) is higher than the MM2 average of 1.1. The GP FTE and number of GPs in the catchment has increased in the last few years meaning services access has been meeting increased demand. <p>A change to DPA status is not supported as the catchment is well serviced in terms of GP FTE and services per capita.</p>
QLD	Hervey Bay	Granted	<p>On 22 December 2021, the DPA status of Hervey Bay application was considered by the DWG. The following factors were considered in granting DPA status:</p> <ul style="list-style-type: none"> greater proportion of vulnerable population increased and increasing GP type presentations to A&E high elderly retirement age of the GP residual workforce inflow of patients from the Maryborough catchment hospital has been on yellow status (accepting emergency patients only) for some time the support of Health Workforce Queensland <p>DPA status is granted until the next DPA update on 1 July 2022, effective from the publication of this outcome (20 January 2022).</p>
QLD	Bribie Island-Beachmere	Granted	<p>On 22 December 2021, the DWG considered further information regarding this catchment. The following factors were noted in granting DPA status:</p> <ul style="list-style-type: none"> the growing population and high proportion of elderly and vulnerable population.

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			<ul style="list-style-type: none"> evidence of significant use of the Emergency Department for GP type presentations. large proportion of GP workforce over 55 seeking to retire or at least wind down, combined with recent GP losses. the support of Health Workforce Queensland. <p>DPA status is granted until the next DPA update on 1 July 2022, effective from the publication of this outcome (20 January 2022), for the MM1 (outer metropolitan) and MM2 portions of this catchment. There is a MM3 area within the catchment that covers the Bribie Island National Park and attracts automatic DPA status but there are no medical practices operating in this area.</p>
QLD	Toowoomba	Granted	<p>On 22 December 2021, the DPA status of the Toowoomba GP catchment was considered by the DWG. A range of factors were considered in granting DPA status including:</p> <ul style="list-style-type: none"> the support of Health Workforce Queensland increasing ED use for GP services the large proportion of retirement age GPs the inflow of patients from the surrounding towns to Toowoomba. <p>The Toowoomba catchment will become DPA until the next update (1 July 2022), effective from the publication of this outcome (20 January 2022).</p>
QLD	Gracemere-Mount Morgan	Granted	<p>On 22 December 2021, the DPA status of Gracemere-Mount Morgan, QLD was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> the net loss of GPs and long-term difficulty in recruiting doctors to some practices

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			<ul style="list-style-type: none"> the health care needs of the vulnerable and indigenous populations in the area, and the level GP services provided to patients from outside of the Gracemere-Mount Morgan catchment. <p>The Gracemere-Mount Morgan catchment will become DPA until the next update (1 July 2022) effective from the publication of this outcome (20 January 2022).</p>
QLD	Mackay	Granted	<p>On 22 December 2021, the DPA status of Mackay was re-considered by the DWG with additional information submitted by Health Workforce Queensland, relating to other comparable catchments in QLD.</p> <p>The DWG recommends DPA status until the next DPA update on 1 July 2022 based on the recent sudden decrease in doctors between January and September 2021. This sudden reduction is the determining factor in recommending a temporary change in DPA status, as Mackay has experienced greater GP services access per capita than the MM2 average in recent assessments.</p> <p>The Mackay catchment will become DPA until the next update 1 July 2022, effective from the publication of this outcome (20 January 2022).</p>
QLD	Maryborough	Granted	<p>On 8 December 2021, the DWG considered applications from MM 3 and MM 4 locations, noting the Government's decision to extend ongoing automatic DPA status to these locations from 1 January 2022.</p> <p>Ongoing DPA status is granted to these catchments, effective from the publication of this outcome (17 December 2021).</p>

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QLD	Dalby	Granted	<p>On 8 December 2021, the DWG considered applications from MM 3 and MM 4 locations, noting the Government's decision to extend ongoing automatic DPA status to these locations from 1 January 2022.</p> <p>Ongoing DPA status is granted to these catchments, effective from the publication of this outcome (17 December 2021).</p>
QLD	Gatton–Withcott	Granted	<p>On 8 December 2021, the DWG considered applications from MM 3 and MM 4 locations, noting the Government's decision to extend ongoing automatic DPA status to these locations from 1 January 2022.</p> <p>Ongoing DPA status is granted to these catchments, effective from the publication of this outcome (17 December 2021).</p>
QLD	Gympie	Granted	<p>On 8 December 2021, the DWG considered applications from MM 3 and MM 4 locations, noting the Government's decision to extend ongoing automatic DPA status to these locations from 1 January 2022.</p> <p>Ongoing DPA status is granted to these catchments, effective from the publication of this outcome (17 December 2021).</p>
QLD	Cairns	Granted	<p>The DPA status of Cairns was considered by the DWG. In granting temporary DPA status to this catchment, the following factors were considered:</p> <ul style="list-style-type: none"> • the GP catchment of Cairns experiences relatively high levels of demand for GP services in comparison with other MM2 catchments. • this demand is partly generated by higher levels of socio-economic disadvantage, and higher than average population cohorts experiencing chronic disease and/or complex medical issues.

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			<ul style="list-style-type: none"> • the significant loss of doctors in Cairns between 2017 and 2021 (an 11 per cent reduction overall). • a relatively high proportion of doctors in this catchment are reaching retirement age (over 65 years) and there is evidence of significant difficulty in replacing these retiring doctors. • the annual DPA assessment for Cairns has consistently trended downwards toward the distribution benchmarks over the past three years. <p>The Cairns catchment will become DPA until the next update (1 July 2022), effective from the publication of this outcome (15 February 2022).</p>
QLD	Springfield-Redbank	Not granted	<p>The DPA status of Springfield-Redbank was considered by the DWG. The DWG considered the following factors:</p> <ul style="list-style-type: none"> • while there is evidence of increased patient demand, the catchment maintains equal levels of GP services access compared to the average in MM2 areas. • four per cent population growth across the catchment from 2019. • the GP FTE per 1,000 patients (1.2) is in-line with the MM2 benchmark (1.1). • overall, the GP FTE has increased since 2017 meaning the net level of services access across the catchment has been meeting increased demand. <p>A change to DPA status is not supported as the catchment is receiving adequate services in terms of GP FTE and services per capita across the catchment.</p>

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QLD	Ipswich	Granted	<p>On 27 January 2022, the DPA status of Ipswich was considered by the DWG. The following factors were considered in granting DPA status:</p> <ul style="list-style-type: none"> • an ageing GP workforce and associated retirements • low SEIFA rating and large population of vulnerable clients • the location is in a major growth corridor • evidence of bulk billing practices turning patients away. <p>DPA status is granted until the next DPA update on 1 July 2022, effective from the date of publication of this outcome (21 February 2022).</p>
QLD	Noosa Hinterland	Granted	<p>On 27 January 2022, the DPA status of Noosa Hinterland was considered by the DWG. The following factors were considered in granting DPA status:</p> <ul style="list-style-type: none"> • the application was supported by both the RWA and PHN • the reduction in the total GP numbers • lower GP FTE than the benchmark • increased non acute presentations to the A&E Department evidencing unmet need. <p>DPA status is granted until the next DPA update on 1 July 2022, effective from the date of publication of this outcome (21 February 2022).</p>
QLD	Kuranda	Granted	<p>The DPA status of Kuranda was considered by the DWG. The GP catchment of Kuranda is classified MM2 and MM5, with the MM 5 locations within the catchment classified as DPA due to the automatic rules. The following factors were considered:</p>

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
			<ul style="list-style-type: none"> • the applicant has lost a number of GPs over time and has been unable to recruit replacement doctors, despite assistance from Health Workforce Queensland. • data indicates the population experiences significant socio-economic disadvantage and higher/more complex medical needs, including higher rates of chronic disease. The Aboriginal and Torres Strait Islander population in this catchment (13 per cent) is significantly higher than the national average (3 per cent). • the GP FTE per 1000 patients in Kuranda is lower than the MM2 average (0.8 in 2020, MM2 average of 1.1). • the annual DPA assessments in 2019-20 and 2020-21 were marginally higher than the distribution benchmarks for GPs and below the distribution benchmark for Bonded doctors. • Kuranda has been classified DPA for Bonded doctors since 2019-20. This has not increased GP services access. • the evidence indicates that Kuranda is not receiving sufficient GP services access to meet the needs of the catchment's population. <p>A change to DPA status is supported as GP services levels are less than the national average. DPA status is granted until the next DPA update on 1 July 2022, effective from the publication of this outcome (15 March 2022).</p>
QLD	Maleny-Mapleton	Not granted	<p>The DPA status of Maleny-Mapleton was considered by the DWG. The GP catchment of Maleny-Mapleton is classified MM2 and MM5, with the MM 5 locations within the catchment classified as DPA due to the automatic rules. The following factors were considered:</p>

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
			<ul style="list-style-type: none"> • while there is evidence of increased patient demand, the catchment maintains higher levels of GP services access compared to the average in MM2 areas. • overall, the GP FTE in Maleny-Mapleton is 1.3, compared to a MM2 average of 1.1. • the number of GPs in the catchment has increased since 2017 and the GP FTE has increased since 2017. Patient services have increased demonstrating the net level of services access across the catchment has been meeting the increased demand. • the annual DPA assessment for the catchment is significantly higher than the national benchmark for GP services levels. <p>A change to DPA status is not supported as the catchment is well serviced in terms of GP FTE and services per capita.</p>
QLD	Nambour	Not granted	<p>The DPA status of Nambour was considered by the DWG. The GP catchment of Nambour is classified MM1 and MM2. The following factors were considered:</p> <ul style="list-style-type: none"> • the GP FTE per 1000 patients in Nambour in 2020 (1.2) is slightly higher than the MM2 average (1.1). • while total doctor numbers in the catchment have fluctuated in the four years to 2020, there has not been a significant decrease in GP FTE. • in the most recent annual DPA update, Nambour was assessed as significantly above the benchmarks for GPs and Bonded doctors. • while there has been moderate population growth in Nambour and there is evidence of some socio-economic disadvantage in this catchment, the applicants have not demonstrated that there are exceptional

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
			<p>circumstances that are significantly impacting GP services access within the catchment.</p> <p>A change to DPA status is not supported as the catchment is currently experiencing sufficient GP services levels to meet the needs of the population.</p>
QLD	Jimboomba	Not granted	<p>The DPA status of Jimboomba was considered by the DWG. The GP catchment of Jimboomba is classified MM1, MM2 and MM3, with the MM 3 locations within the catchment classified as DPA due to the DPA automatic rules. The following factors were considered:</p> <ul style="list-style-type: none"> • Jimboomba has experienced significant population growth of approximately 21 per cent over the four years to 2020. During this period there was also a 21 per cent increase in the number of GP services provided in the catchment, indicating that the increase in demand for GP services has been proportionate to the population growth in the catchment. • the total number of GPs has increased by 26 per cent since 2017 and there has been a 12 per cent increase in GP FTE over that time. This increase in GP services has been proportionate to the increase in demand for GP services. • the annual DPA assessments over the three years to 2021 have been significantly higher than the distribution benchmarks for GPs and Bonded doctors. <p>A change to DPA status is not supported as the catchment is currently experiencing sufficient GP services levels to meet the needs of the population.</p>

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
QLD	Tamborine-Canungra	Not granted	<p>The DPA status of Tamborine-Canungra was considered by the DWG. The GP catchment of Tamborine-Canungra is classified MM1, MM2, MM4 and MM5, with the MM4 and MM5 locations within the catchment classified as DPA due to the automatic rules. The following factors were considered:</p> <ul style="list-style-type: none"> • data indicates that demand for GP services in this catchment has grown significantly over the four years to 2020-21. The growth in demand has been disproportionately greater than the increase in population within the catchment in this time period. • increased demand for GP services within has been offset by growth in the total number of GPs working in the catchment and the GP FTE in the catchment. GP FTE increased by 30 per cent in the four years to 2020-21. • the GP FTE per patients ratio has increased steadily in this catchment, from 1.1 in 2017-18 to 1.4 in 2020-21. • in the most recent annual DPA update, Tamborine-Canungra was assessed as significantly above the benchmarks for distribution of GPs and Bonded doctors. <p>A change to DPA status is not supported as the catchment is currently experiencing sufficient GP services levels to meet the needs of the population.</p>
QLD	Cleveland-Stradbroke	Not granted	<p>The DPA status of Cleveland-Stradbroke was considered by the DWG. The catchment of Cleveland-Stradbroke is classified as MM1 Outer Metro. The following factors were considered:</p>

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
			<ul style="list-style-type: none"> • while there is evidence of increased patient demand, the catchment maintains higher levels of GP services access compared to the average in MM2 areas. • overall, the GP FTE in Cleveland-Stradbroke is 1.4, higher than the MM2 average of 1.1. • the numbers of GPs in the catchment has increased since 2017, the GP FTE has increased since 2017. Patient services have increased, and the GP FTE to number of GPs is 0.7 and slightly above the MM2 average of 0.6. This demonstrates the net level of services access across the catchment has been meeting increased demand. • the annual DPA assessment for the catchment is significantly higher than the national benchmark for GP services levels. <p>A change to DPA status is not supported as the catchment is well serviced in terms of GP FTE and services per capita.</p>
QLD	Caloundra	Not granted	<p>The DPA status of Caloundra was considered by the DWG. The catchment of Caloundra is classified as MM1 Outer Metro. The following factors were considered:</p> <ul style="list-style-type: none"> • while there is evidence of increased patient demand, the catchment maintains higher levels of GP services access compared to the average in MM2 areas. • overall, the GP FTE in Caloundra is 1.7, compared to a MM2 average of 1.1. • the numbers of GPs in the catchment has increased since 2017, the GP FTE has increased since 2017. Patient services have increased but the GP FTE to number of GPs is 0.6 and at level with the MM2 average of

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
			<p>0.6. This demonstrates the net level of service access across the catchment has been meeting the increased demand.</p> <ul style="list-style-type: none"> the annual DPA assessment for the catchment is significantly higher than the national benchmark for GP services levels. <p>A change to DPA status is not supported as the catchment is well serviced in terms of GP FTE and services per capita.</p>
QLD	Buderim	Not granted	<p>The DPA status of Buderim was considered by the DWG. The catchment of Buderim is classified as MM1 Outer Metro. The following factors were considered:</p> <ul style="list-style-type: none"> While there is evidence of increased patient demand, the catchment maintains significantly higher levels of GP services access compared to the national benchmark. The GP FTE per 1,000 patients in Buderim is 1.3 and slightly above the MM2 national average of 1.1. Overall, the GP FTE and services in the catchment has increased since 2017 meaning the net level of service access across the catchment has been meeting the increased demand. <p>A change to DPA status is not supported as the catchment is well serviced as indicated by GP FTE and services per capita.</p>
QLD	Ormeau-Oxenford	Not granted	<p>The DPA status of Ormeau-Oxenford was considered by the DWG. The catchment of Ormeau-Oxenford is classified as MM1 Outer Metro. The following factors were considered:</p> <ul style="list-style-type: none"> while there is evidence of increased patient demand, the catchment maintains higher levels of GP services access compared to the average. overall, the GP FTE in Ormeau-Oxenford is 1.3, compared to a MM2 average of 1.1.

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
			<ul style="list-style-type: none"> the DPA indicator value for the catchment is significantly higher than the national benchmark for GP services levels. <p>A change to DPA status is not supported as the catchment is well serviced in terms of GP FTE and services per capita.</p>
QLD	North Lakes	Not granted	<p>The DPA status of North Lakes was considered by the DWG. The catchment of North Lakes is classified MM1 and the applicant's practice is located within an outer metropolitan area.</p> <p>The following factors were considered:</p> <ul style="list-style-type: none"> The catchment of North Lakes has experienced significant population expansion over the four years to 2021, and as a consequence there has been a large increase in demand for GP services in that time. At the same time, there has been a substantial increase in the number of GPs practicing in North Lakes between 2017 and 2021 and the GP FTE in the catchment has increased commensurately. The GP FTE per 1000 patients in North Lakes in 2020 (1.4) is higher than the MM2 average (1.1) In the most recent annual DPA update, North Lakes was assessed as significantly above the benchmarks for distribution of GPs and Bonded doctors. <p>A change to DPA status is not supported as the catchment is currently experiencing sufficient GP services levels to meet the needs of the population.</p>

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
QLD	Beenleigh	Not granted	<p>The DPA status of Beenleigh was considered by the DWG. The catchment of Beenleigh is classified MM1 and the entire catchment is classified outer metropolitan. The following factors were considered:</p> <ul style="list-style-type: none"> • while there is evidence of socio-economic disadvantage and higher than average demand for GP services in this catchment, there is also evidence that GP services and numbers are currently sufficient to meet this demand. • there has been a net increase in the number of GPs practicing in Beenleigh between 2017 and 2021, and the GP FTE has been stable over those four years. • the GP FTE per 1000 patients in Beenleigh in 2020 (1.6) is significantly higher than the MM2 average (1.1) • in the most recent annual DPA update, Beenleigh was assessed as significantly above the benchmarks for distribution of GPs and Bonded doctors. <p>A change to DPA status is not supported as the catchment is currently experiencing sufficient GP services levels to meet the needs of the population.</p>
QLD	Townsville	Not granted	<p>The DPA status of Townsville was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> • while there is evidence of increased patient demand, the catchment maintains higher levels of GP services access compared to the average in MM2 areas. • the GP FTE per 1,000 patients is higher in Townsville at 1.2, compared to a MM2 average of 1.1.

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
			<ul style="list-style-type: none"> the numbers of GPs in the catchment has increased by 18 since 2017, the GP FTE has increased by 9 since 2017. patient services have increased, and the GP FTE to number of GPs is 0.6, equal to the MM2 average. This demonstrates the net level of services access across the catchment is meeting the increased demand. <p>A change to DPA status is not supported as the catchment is well serviced in terms of GP FTE and services per capita.</p>
QLD	Rosewood	Not granted	<p>The DPA status of Rosewood was considered by the DWG. Rosewood includes both MM1 and MM2 areas. The following factors were considered:</p> <ul style="list-style-type: none"> while there is evidence of increased patient demand, the catchment maintains higher levels of GP services access compared to the average in MM2 areas. overall, the GP FTE in Rosewood is 1.1, compared to a MM2 average of 1.1. the numbers of GPs in the catchment has increased since 2017, the GP FTE has increased since 2017. Patient services have increased but the GP FTE to number of GPs is 0.5 and slightly lower than the MM2 average of 0.6. This demonstrates the net level of service access across the catchment has been meeting the increased demand. the DPA indicator value for the catchment is significantly higher than the national benchmark for GP services levels. <p>A change to DPA status is not supported as the catchment is well serviced in terms of GP FTE and services per capita.</p>

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
QLD	Caboolture	Granted	<p>The DPA status of Caboolture was considered by the DWG. The catchment of Caboolture is classified as MM1 Outer Metro. The following factors were considered:</p> <ul style="list-style-type: none"> • A&E presentations for category 4 and 5 increases 300% to 400% year on year • absolute numbers of GPs are one-third to one-fifth of surrounding areas <p>DPA status is granted until the next DPA update on 1 July 2022, effective from the date of publication of this outcome 30 March 2022.</p>
QLD	Noosa	Not granted	<p>The DPA status of Noosa was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> • while there is evidence of increased patient demand, the catchment maintains significantly higher levels of GP services access compared to the average. • the GP FTE per 1,000 patients in Noosa is 1.7 and higher than the average of 1.1. Overall, the GP FTE and services in the catchment have increased since 2017 meaning the net level of services access across the catchment has been meeting the increase in demand. <p>A change to DPA status is not supported as the catchment is well serviced in terms of GP FTE and services per capita.</p>
QLD	The Hills District	Not granted	<p>The DPA status of The Hills District, QLD was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> • the GP FTE per 1000 patients in The Hills District is 1.2 compared to a MM2 average of 1.1.

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
			<ul style="list-style-type: none"> the DPA indicator value of the catchment is 16 per cent above the national benchmark for GP services levels. there is no evidence of significantly disadvantaged and/or vulnerable population cohorts within this GP catchment. <p>A change to DPA status is not supported as the catchment is currently experiencing sufficient GP services levels to meet the needs of the population.</p>
QLD	Beerwah-Landsborough,	Not granted	<p>The DPA status of Beerwah – Landsborough, QLD was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> while there is evidence of increased patient demand, the catchment maintains significantly higher levels of GP services access compared to the average of MM2 areas. the GP FTE per 1000 patients in Beerwah - Landsborough is 1.3 compared to a MM2 average of 1.1 overall, the GP FTE and number of GPs in the catchment has increased since 2017 meaning the net level of service access across the catchment has been meeting the increased demand. <p>A change of DPA status is not supported as the catchment is well serviced in terms of GP FTE and services, number of GPs and services per capita.</p>
QLD	Kilcoy-Woodford	QLD	<p>The DPA status of Kilcoy - Woodford was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> larger vulnerable population (Indigenous and elderly) there are MM5 areas included in this catchment

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
			DPA status is granted until the next DPA update on 1 July 2022, effective from the date of publication of this outcome (11 April 2022).
SA	Elizabeth	Granted	<p>The DPA status of Elizabeth was considered by the DWG. The GP catchment of Elizabeth is classified MM1 outer metropolitan. The following factors were considered:</p> <ul style="list-style-type: none"> increasing inability to fulfil role of priority care centre responsibilities for the SA government who rely on larger practices in the region to take the overflow from A& E departments. <p>DPA status is granted until the next DPA update on 1 July 2022, effective from the date of publication of this outcome (30 March 2022).</p>
TAS	Brighton	Granted	<p>On 22 December 2021, the DPA status of Brighton was considered by the DWG. The following factors were considered in granting DPA status:</p> <ul style="list-style-type: none"> the population has significantly increased in recent years leading to greater demand for services, from patients within and outside of the catchment practices in this catchment have been unable to recruit non-restricted GPs with the assistance from HR Plus resulting in high workloads on GPs who remain at practices where doctors have left. the catchment of Brighton is socio-economically disadvantaged relative to other areas of Australia. <p>DPA status is granted until the next DPA update on 1 July 2022, effective from the publication of this outcome (20 January 2022).</p>

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
TAS	Wynyard	Granted	<p>On 8 December 2021, the DWG considered applications from MM 3 and MM 4 locations, noting the Government's decision to extend ongoing automatic DPA status to these locations from 1 January 2022.</p> <p>Ongoing DPA status is granted to these catchments, effective from the publication of this outcome (17 December 2021).</p>
VIC	Bunyip-Garfield	Granted	<p>The DPA status of Bunyip-Garfield was considered by the DWG. The GP catchment of Bunyip-Garfield is classified MM 2, MM 4 and MM 5 under the Modified Monash Model (MMM). The single applicant for exceptional circumstances review provided evidence of insufficient GP service in the catchment. The DWG considered the following factors:</p> <ul style="list-style-type: none"> the GP FTE and the GP FTE per 1000 patients ratio in Bunyip-Garfield is significantly lower (0.5) than the MM2 average (1.1). a higher than average proportion of patients seeking GP services in Bunyip-Garfield reside outside the catchment's boundaries, indicating that GP services in the catchment are being stretched further than indicated by the GP FTE per 1000 patients ratio. the GP services in Bunyip-Garfield are not sufficient to meet the needs of the community. <p>A change to DPA status is recommended as the catchment is currently experiencing insufficient GP services levels to meet the needs of the population, effective from the publication of this outcome (11 July 2022).</p>
VIC	Burnside (VIC)	Not granted	<p>The DPA status of Burnside was considered by the DWG. The following factors were considered:</p>

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
			<ul style="list-style-type: none"> the GP FTE is 0.7 above the benchmark of 0.6 although the number of services per capita is lower at 4.9 compared to the MM2 average. between 2017-2020, there was an 11 per cent increase in GP FTE in the catchment. <p>A change of DPA status is not supported as the catchment is adequately serviced in terms of GP FTE and services per capita.</p>
VIC	Healesville-Yarra Glen	Not granted	<p>The DPA status of Healesville-Yarra Glen was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> the Healesville-Yarra Glen GP catchment has experienced an increase in GP FTE of approximately 12 per cent since 2017-18, higher than the catchment's population growth of two per cent in the same period. Total GP numbers in the catchment remains steady. the GP FTE per 1,000 patients (1.3) is higher than the MM2 average (1.1). there is no evidence of significant socio-economic disadvantage in the catchment. <p>A change of DPA status is not supported as the catchment is adequately serviced in terms of GP FTE and services per capita.</p>
VIC	Lilydale-Yarra Valley	Not granted	<p>The DPA status of Lilydale – Yarra Valley, VIC was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> while there is evidence of increased patient demand, the catchment maintains higher levels of GP services access compared to the average of MM2 areas.

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
			<ul style="list-style-type: none"> the GP FTE per 1000 patients in Lilydale – Yarra Valley is 1.1, level with the MM2 average. <p>A change of DPA status is not supported as the catchment is adequately serviced in terms of GP FTE and services per capita.</p>
VIC	Shepparton– Mooroopna	Granted	<p>On 8 December 2021, the DWG considered applications from MM 3 and MM 4 locations, noting the Government’s decision to extend ongoing automatic DPA status to these locations from 1 January 2022.</p> <p>Ongoing DPA status is granted to these catchments, effective from the publication of this outcome (17 December 2021).</p>
VIC	Gisborne	Granted	<p>On 8 December 2021, the DWG considered applications from MM 3 and MM 4 locations, noting the Government’s decision to extend ongoing automatic DPA status to these locations from 1 January 2022.</p> <p>Ongoing DPA status is granted to these catchments, effective from the publication of this outcome (17 December 2021).</p>
VIC	Wyndham	Not granted	<p>The DPA status of Wyndham was considered by the DWG. The DWG considered the following factors:</p> <ul style="list-style-type: none"> while there is evidence of increased patient demand, the catchment maintains significantly higher levels of GP services access compared to the average in MM2 areas. the GP FTE in Wyndham is 1.3 compared to a MM2 average of 1.1. Overall, the GP FTE and number of GPs in the catchment has increased since 2017 meaning the net level of service access across the catchment has been meeting the increased demand.

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
			A change to DPA status is not supported as the catchment is well serviced in terms of GP FTE and services per capita.
VIC	Frankston	Not granted	<p>The DPA status of Frankston was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> • while there is evidence of increased patient demand, the catchment maintains significantly higher levels of GP services access compared to the average in MM2 areas. • the catchment has not seen a major increase in population levels over the past few years; this trend is expected to continue until 2026 (although this is outside the scope of the review). • the GP FTE in Frankston is higher compared to a MM2 average. Overall, the GP FTE has increased since 2017 meaning the net level of service access across the catchment has been meeting the increased demand. <p>A change to DPA status is not supported as the catchment is well serviced in terms of GP FTE and services per capita.</p>
VIC	Bacchus Marsh-Melton	Not granted	<p>The DPA status of Bacchus Marsh-Melton was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> • the population in the catchment of Melton-Bacchus-Marsh has increased and there has been a slight reduction in the total number of doctors working in the catchment since 2017. • the GP FTE has increased slightly since 2017. The GP FTE per 1000 patients has fallen slightly (to the MM2 average of 1.1 in 2020/21) as the population of the catchment has increased.

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
			<ul style="list-style-type: none"> the catchment does not have a disproportionately highly vulnerable population cohort, although there are some areas within this catchment which experience socio-economic disadvantage. the number of applicants (2) is low relative to the total number of practices in this catchment (17), suggesting that the difficulties experienced by these practices may relate to their business models or other circumstances. <p>While some indicators show the catchment could benefit from DPA status, there are other indicators that still show this catchment as having access to GP services in line with or in a better position than the MM2 average.</p> <p>The catchment of Bacchus Marsh-Melton will remain non-DPA until it is again tested for GP services access as part of the annual DPA update scheduled for 1 July 2022.</p>
VIC	Tullamarine-Broadmeadows	Not granted	<p>The DPA status of Tullamarine-Broadmeadows was considered by the DWG. The catchment of Tullamarine-Broadmeadows is classified MM1 and the applicant is located in an outer metro location. The following factors were considered:</p> <ul style="list-style-type: none"> while there is evidence of increased patient demand, the catchment maintains significantly higher levels of GP services access compared to the average in MM2 areas. the GP FTE in Tullamarine-Broadmeadows is higher compared to a MM2 average. Overall, the GP FTE has increased since 2017 (by 19 per cent) meaning the net level of service access across the catchment has been meeting the increased demand.

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
			A change to DPA status is not supported as the catchment is well serviced in terms of GP FTE and services per capita.
VIC	Wallan	Granted	<p>The DPA status of Wallan, VIC was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> • a decrease in GP numbers, GP FTE and lower than average GP FTE to 1,000 patients. • the significant increase in population and services to patients. <p>DPA status is granted until the next DPA update on 1 July 2022, effective from the date of publication of this outcome (11 April 2022).</p>
VIC	Torquay-Ocean Grove	Granted	<p>The DPA status of Torquay-Ocean Grove was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> • the catchment maintains lower levels of GP services access compared to the average in MM2 areas. • the GP FTE is below the average MM2 benchmark. • the number of services per capita is lower than the MM2 benchmark. <p>DPA status is granted until the next DPA update on 1 July 2022, effective from the date of publication of this outcome (11 April 2022).</p>
VIC	Mill Park-Epping,	Not granted	<p>The DPA status of Mill Park – Epping, VIC was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> • while there is evidence of increased patient demand, the catchment maintains significantly higher levels of GP services access compared to the average MM2 areas.

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
			<ul style="list-style-type: none"> the GP FTE per 1000 patients in Mill Park - Epping is 1.3 compared to a MM2 average of 1.1 overall, the GP FTE and number of GPs in the catchment has increased since 2017 meaning the net level of service access across the catchment has been meeting the increased demand. <p>A change of DPA status is not supported as the catchment is well serviced in terms of GP FTE and services per capita.</p>
VIC	Frankston, - DPA - reassessment	VIC	<p>The DPA status of Frankston was reconsidered by the DWG, following submission of an additional application. The following factors were considered:</p> <ul style="list-style-type: none"> while there is evidence of increased patient demand, the catchment maintains higher levels of GP services access compared to the average in MM2 areas. the GP FTE per 1000 patients in Frankston is 1.3 compared to a MM2 average of 1.1 <p>The further assessment demonstrates that the change to DPA status is not supported as the catchment remains well serviced in terms of GP FTE and services per capita.</p>
WA	Byford	Not granted	<p>The DPA classification of Byford was considered by the DWG.</p> <p>The following factors were considered:</p> <ul style="list-style-type: none"> The assessment against the DPA benchmark has increased from 5 per cent above benchmark in 2021 to 7 per cent above the benchmark in 2022, indicating an increase in GP services access.

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
			<ul style="list-style-type: none"> The total number of GPs working in the catchment has increased between 2017-18 (38) and 2020-21 (44). <p>A change of DPA classification is not supported as the catchment is well serviced in terms of GP services access.</p>
WA	Cockburn	Not granted	<p>The DPA status of Cockburn, WA was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> while there is evidence of increased patient demand, the catchment maintains significantly higher levels of GP services access compared to the average MM2 areas. the GP FTE per 1000 patients in Cockburn is 1.3 compared to a MM2 average of 1.1. overall, the GP FTE and number of GPs in the catchment has increased since 2017 meaning the net level of service access across the catchment has been meeting the increased demand. <p>A change of DPA status is not supported as the catchment is well serviced in terms of GP FTE and services per capita.</p>
WA	Two Rocks-Yanchep	Granted	<p>On 22 December 2021, the DPA status of Two Rocks-Yanchep was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> an inability to recruit GPs, resulting in increased pressure to the remaining GPs and increased waiting times for patients growing demand for GP services from patients outside of the GP catchment with population increases in the area resulting in increasing workloads for doctors.

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
			DPA status is granted until the next DPA update on 1 July 2022, with effect from the date of publication (20 January 2022).
WA	Kwinana	Granted	<p>The DPA status of Kwinana was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> • a significant drop in GP numbers since 2017 which have not been replaced. • health workforce data suggests that this catchment comprises GP services below MM2 average. • an increase in population and demand for services from patients. • an inability to recruit GPs despite sustained advertising over a period of two years. • an inability to recruit additional doctors despite sustained advertising over a period of two years, resulting in increased pressure on the remaining GPs. <p>A change to DPA status is supported for 2020-21 based on the above factors. A temporary change of DPA status will assist further to address local recruitment issues. The Kwinana catchment will become DPA until the next update (1 July 2022), effective from the publication of this outcome (15 February 2022).</p>
WA	Rockingham	Granted	<p>The DPA status of Rockingham was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> • a significant drop in GP numbers in the past year, which has not been counted in the most recent DPA assessment, together with a further five GPs forecast to depart in coming months.

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
			<ul style="list-style-type: none"> an increase in the population and demand for services from patients, resulting in increased presentations to the local Emergency Department (ED) and increased wait times for an appointment. an inability to recruit GPs, despite offering above market rates, resulting in increased pressure on the remaining GPs <p>A change to DPA status is supported for 2021-22. A temporary change to DPA status will assist further to address local issues.</p> <p>The Rockingham catchment will become DPA until the next update (1 July 2022), effective from the publication of this outcome (15 February 2022).</p>
WA	Bunbury	Granted	<p>On 12 January 2022, the DPA status of Bunbury was considered by the DWG. The following factors were considered in granting DPA status:</p> <ul style="list-style-type: none"> the number of practices in the catchment experiencing the same issues the data source does not reflect current issues in the catchment difficulty in access to GP services for patients is demonstrated. access to GPs is being limited by prioritisation or mental health acute care in some practices. <p>DPA status is granted until the next DPA update on 1 July 2022, effective from the date of publication of this outcome (4 February 2022).</p>
WA	Mandurah	Granted	<p>On 12 January 2022, the DPA status of Mandurah was considered by the DWG. The following factors were considered in granting DPA status:</p> <ul style="list-style-type: none"> the MM status of the catchment is disparate ranging from MM1 to MM5, which may be disadvantaging certain communities' access to GP services and may not be contemporaneous.

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
			<ul style="list-style-type: none"> catchment level assessment may be skewed by GP practices with multiple doctors which provide more specialised service than pure primary care. the support of the Rural Workforce Agency. <p>DPA status is granted until the next DPA update on 1 July 2022, effective from the date of publication of this outcome (4 February 2022).</p>
WA	Wanneroo-Quinns Rock	Not granted	<p>The DPA status of Wanneroo-Quinns Rocks was considered by the DWG, with much discussion of the circumstances of this catchment. The catchment of Wanneroo-Quinns Rock is classified as MM1 Outer Metro. The following factors were considered:</p> <ul style="list-style-type: none"> there is evidence of strong increases to patient demand, however, the catchment maintains higher levels of GP services access compared to the average. <p>While some indicators show the catchment could benefit from DPA status, there are other indicators that show this catchment as having access to GP services in line with or better than the average.</p> <p>The catchment of Wanneroo-Quinns Rock will remain non-DPA until further assessment within the next DPA update on 1 July 2022.</p>
WA	Swan	Not granted	<p>The DPA status of Swan in Western Australia was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> there are currently no general practices in the suburb of Brabham and there is evidence of significant population growth in the catchment of Swan

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
			<ul style="list-style-type: none"> however, key GP services access indicators, including the per 1000 patients, are currently equal to the national benchmark indicating the catchment has access to sufficient services in other suburbs. <p>A change to DPA status is not supported as the broader catchment is well serviced in terms of GP FTE and services per capita.</p>
WA	Kalamunda	Not granted	<p>The DPA status of Kalamunda was considered by the DWG. The following factors have been considered:</p> <ul style="list-style-type: none"> While there is evidence of increased patient demand with Kalamunda, the catchment has also experienced increases in the total number of GPs, the GP FTE and the GP FTE per 1000 patients. Between 2017 and 2021, the number of GPs increased by seven per cent, GP FTE increased by 15 per cent and GP FTE per 1000 patients increased to the national average of 1.1. These increases mean GP services access within Kalamunda is equal to the national average level of service. <p>A change to DPA status is not supported at this time. The catchment has sufficient GP services access levels to meet the needs of the population.</p>
WA	Armadale	Not granted	<p>The DPA status of Armadale was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> while there is evidence of increased patient demand, the catchment maintains higher levels of GP services access compared to the average. overall, the GP FTE in Armadale is 1.1, compared to the average of 1.1. the number of GPs in the catchment has decreased by 5 since 2017, and the GP FTE has increased by 10 since 2017. Patient services have

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
			<p>increased and the GP FTE to number of GPs is 0.6, at level with the average, meaning the net level of service access across the catchment has been meeting the increased demand.</p> <p>A change to DPA status is not supported as the catchment is well serviced in terms of GP FTE and services per capita.</p>
WA	Mundaring – Swan view	Not granted	<p>The DPA status of Mundaring-Swan View was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> • there has been an increase in GPs with the rate of increase being higher than the increase in population. • the patient inflows and outflows are high and suggests strong accessibility of medical services outside of this catchment which are easily accessible. • the SEIFA score does not indicate this is an area of disadvantage. • of the number of GP practices in this catchment, only one practice has applied for a review of DPA status. <p>The catchment of Mundaring-Swan View will remain non-DPA until further assessment during the next DPA update on 1 July 2022.</p>
WA	Joondalup	Not granted	<p>The DPA status of Joondalup was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> • while there is evidence of some increase in patient demand in Joondalup, the catchment has also experienced increases in the total number of GPs, the GP FTE and the GP FTE per 1000 patients.

State/Territory	GP Catchment	DPA Status Outcome	Outcome Summary
			<ul style="list-style-type: none"> • between 2017-18 and 2020-21, the number of GPs increased by 2.5 per cent and the GP FTE increased by 3.7 per cent. The GP FTE per 1000 patients increased to 1.3 in 2020-21 from 1.2 in 2019-20. • these increases have ensured that GP services access within Joondalup is higher than the average level of service in MM2 areas. • there is no evidence of significantly disadvantaged and/or vulnerable population cohorts within this GP catchment. <p>A change to DPA status is not supported as the catchment is currently experiencing sufficient GP services levels to meet the needs of the population.</p>
WA	Gosnells	Not granted	<p>The DPA status of Gosnells, WA was considered by the DWG. The following factors were considered:</p> <ul style="list-style-type: none"> • while there is evidence of increased patient demand, the catchment maintains significantly higher levels of GP services access compared to the average MM2 areas. • the GP FTE per 1000 patients in Gosnells is 1.2 compared to a MM2 average of 1.1 • overall, the GP FTE and number of GPs in the catchment has increased since 2017 meaning the net level of service access across the catchment has been meeting the increased demand. <p>A change of DPA status is not supported as the catchment is well serviced in terms of GP FTE and services per capita.</p>