

# WIP ( Workforce Incentive Program ) :

## Quarterly Confirmation Statement

Quarterly Statement confirmation has not changed, what has changed is the format & how the electronic form looks.

Complete via PRODA. – My programs – WIP – Quarterly Confirmation Statement : Update Hours

Option to nominate hours per Health Professional Type.

1. Update Quarterly Hours.
2. Delete Health Professionals Not in your practice – e.g. EN
3. Reg Nurse – if you wish to record each RN / NP / AHP – then complete last name, first name, Identifier – if AHPRA – will ask for number OR from drop down box select Not Reported and enter total avg weekly hrs for ALL RN.
4. If other eligible Health professionals – add individually or as a group and NOT Reported for the identifier.
5. At conclusion CONFIRM select the bottom option – updated change

Health Professional  
Online Services

Brett McPherson

Main menu

HPOS Home

WIP - Practice Stream

Practice Summary

Practice Details

Contact Details

Payment Details

Ownership Details

Eligibility

Health Professional Details

Locations

Associated GPs

Incentive Summary

Payments

Payment History

Quarterly Confirmation Statement

Practice Staff System Access

Associated Documents

Health Professional Weekly Contracted Hours

\* Reason for Update

Select one

* Health Professional Type	Last Name	First Name	* Identifier	* Weekly Contracted Hours (HHH:MM)	Remove
Registered Nurse			Not Reported	3718	Remove

Add Health Professional

No Data available for Allied Health Professional table

Add Allied Health Professional

Reset

Apply Updates

Declaration

\* Select one from the two declarations below

I declare that

the information contained on this Quarterly Confirmation Statement is correct.

I have read and understood the Workforce Incentive Program Guidelines and confirm the practice is eligible for the incentive as indicated in the QCS.

I understand that giving false or misleading information is a serious offence.

I declare that

where there is a variation, these details have been updated on the practice profile through HPOS, or the relevant form/s have been submitted to Services Australia.

I have read and understood the Workforce Incentive Program Guidelines and confirm the practice is eligible for the incentive as indicated in the QCS.

I understand that giving false or misleading information is a serious offence.

Confirm

Historical Quarters and Changes

Historical Quarters and Changes

Year:

2020

Payment Quarter:

May Quarter

01/02/2020 - 30/04/2020

No records are found for the search criteria entered