In Australia and other developed countries, the provision of after hours primary care services is a challenging policy area. Limited access to after hours services; geographic inequities in provision of services; burden on hospital emergency departments and workload for general practitioners (GPs) have prompted governments to implement after hours primary care reforms. Telephone triage and advice services have been introduced in many countries to help to improve patient access and better manage demand for after hours health services. In Australia such reforms have provoked controversy.

In 2011, an after hours GP helpline was introduced as a supplementary service to existing nurse-provided telephone triage and advice services in Australian states and territories. This thesis examines the recent evolution of after hours primary care policy in Australia with a particular focus on the impact, quality, professional acceptance and consumer uptake of the after hours GP helpline in the context of Australian primary care. The helpline’s effects in relation to four layers of the health system – policy, health services, GP provider and consumer perspectives - are explored using a mixed methods realist evaluation framework.

The research found that the helpline was not wholly successful in integrating with primary care in Australia during its first two years of operation, 2011-2013. Multiple theories of action were developed identifying current and possible pathways for helpline interaction and effect at each level of the health system. These theories identified contextual factors and causal mechanism that can be modified to improve the helpline’s contribution to the Australian health system.