

**AHP Infrastructure Investment Fund
Application for Funding**

Practice Name:

Date:

**Name of Individual
Completing Application:**

Describe the nature of the challenge/problem you're facing:

Describe any previous attempts to solve the problem. If applicable, explain how existing resources were insufficient to resolve the problem.

Describe the solution you propose to this problem in detail. Include information about the types of resources (e.g., staff overtime, temp staffing, consulting services, equipment/supplies) you will need to implement your solution.

Describe the specific impact to your AHP quality measures should you receive this funding and implement your proposed solution. Include degree of improvement to be achieved, timeframe for improvement, and which measures will be impacted.

What would be the expense to the practice to implement your solution? Please itemize if appropriate (e.g, \$x for staff overtime, \$x for equipment etc).

If funded, on what dates do you anticipate starting and completing the project?

Please return completed form and supporting documentation to Renée Sutton at
renee.sutton@ahpnetwork.com