

Acute Health

Cystic Fibrosis Specified Grant

S7 111

2005-2006

| Agency: | | | | | | | | | | | | |
|--|----------------------|--------------|--|----------------------|-----------------|--|---------------------|--|------------------------|--|-------------------|--|
| Output: | Period: | Year: | | | | | | | | | | |
| <table border="1"><thead><tr><th></th><th>Occasions of Service</th></tr></thead><tbody><tr><td>1 Physiotherapy</td><td></td></tr><tr><td>2 Dietetic Services</td><td></td></tr><tr><td>3 Counselling Services</td><td></td></tr><tr><td>4 TOTAL (= 1+2+3)</td><td></td></tr></tbody></table> | | | | Occasions of Service | 1 Physiotherapy | | 2 Dietetic Services | | 3 Counselling Services | | 4 TOTAL (= 1+2+3) | |
| | Occasions of Service | | | | | | | | | | | |
| 1 Physiotherapy | | | | | | | | | | | | |
| 2 Dietetic Services | | | | | | | | | | | | |
| 3 Counselling Services | | | | | | | | | | | | |
| 4 TOTAL (= 1+2+3) | | | | | | | | | | | | |
| Only public non-admitted patient occasions of service are counted on this return. | | | | | | | | | | | | |
| Signed (Chief Executive Officer): | | Date: | | | | | | | | | | |

Notes:

1. A counselling service event will be recognised for funding purposes where the clinician is a practising clinical psychologist, or social worker, or other clinician with counselling qualifications who are members of a recognised professional body such as the Australian Psychological Association.
2. Telephone consultations will not constitute a service event for funding purposes.
3. Services provided as part of an outreach clinic will constitute a service event.