

**Appendix 20.2: Correspondence
Ineligible for service letter—to GP**

Enquiries to:
Telephone:
Facsimile:
Our Ref:

Dear Dr-----

Re: -----

Thank you for your enquiry about referring ----- to the Child Development Service. Unfortunately, you will have already been advised that ----- is ineligible to access this particular service. To assist this family in finding another more appropriate service, I have enclosed the following information:

Details on <i>Chronic Disease Individual Allied Health Services</i> through Medicare	
Details on <i>Better Access to Allied Mental Health Services</i> through Medicare	
Details on the <i>Helping Children with Autism</i> package	
Details on <i>Better Start for Children with a Disability—Early Intervention</i>	
Details on <i>Aboriginal and Torres Strait Islander Allied Health Services</i>	
Private Service providers	
Hearing Tests	
Vision Tests	
Other (Please specify)	

Please do not hesitate to contact me on P: _____ if you would like to discuss this further.

Yours sincerely

Team Leader

____/____/____

Office
Queensland Health
Child Development Service

Postal

Phone

Fax