**CLIENT ASSESSMENT**

Equipment need identified

Trial of stock items (if required)

**EQUIPMENT REVIEW**

Prescriber reviews client need and equipment suitability (Refer to TEP Clinical Guidelines).

Repair and maintenance of nominated items by TEP (Refer to TEP Approved Equipment List)

Level 2 Items

**ORDERING**

TEP Work Unit orders approved items

**CLINICAL APPROVAL**

SEAT/TEP Team Leader or Manager or TEP Advisory Committee clinically approve prescription

**APPLICATION**

Approved Prescriber determines eligibility and completes Application with client (if required)

**QUOTES**

Approved Prescriber sources quote/s (if required) and submits all documents to regional Intake Officer

**PRESCRIPTION**

Approved Prescriber specifies equipment required, completes prescription and determines priority

**EQUIPMENT ISSUE**

Stock Items

Items not in stock

**RECEIPT OF EQUIPMENT**

Client signs for receipt of equipment and is provided with TEP terms and conditions agreed to at the time of application

**INSTRUCTION AND FACT SHEETS**

Approved Prescriber to ensure client provided with appropriate information and instruction. Signed copies to TEP Work Unit for file

**PAYMENT**

TEP Work Unit processes payment and finalises equipment process

**CLIENT CONTRIBUTION** paid direct to supplier

(if required)

**APPROVAL** Cost Centre Manager/Senior Manager approve according to Financial Delegation

**ELIGIBILITY CONFIRMED**

(Refer to TEP FC-2 Eligibility Flowchart)

Level 1 Items

(Clinically Approved by Approved Prescriber)

**PROCESSING** TEP Work Unit processes approval and requests client contribution (if required). Outcome provided to Approved Prescriber