

DISCLOSURE AND CONSENT FORM

Please be aware of the following information regarding our services:

1. **Psychological/ counselling service** As part of providing a service to you, personal information that is relevant to your current situation will be collected and recorded. This information is a necessary part of assessment and treatment. You may access the material recorded in your file upon request, subject to exceptions in National Privacy Principle 6.
2. **Confidentiality** All personal information gathered by the practitioner during provision of service will remain confidential and secure except when:
 - a) Medicare requires information for rebate purposes.
 - b) It is subpoenaed by court.
 - c) Your prior written approval has been obtained to:
 - i. Provide a written report to another professional or agency (eg.. lawyer, doctor)
 - ii. Discuss the material with another person (eg. employer, partner)
 - d) Failure to disclose the information would place you or another person at risk.
 - e) In Victoria, under section 182 and 184 of the *Children Youth and Families Act 2005*, mandated reporters must make a report to Child Protection, if in the course of practising their profession or carrying out employment or office duties, they form a reasonable belief, that a child has been or is at risk of significant harm, as a result of physical or sexual abuse, and the child's parents have not protected or are unlikely to protect the child from that abuse.

Note: In order to maintain high standards of practice your practitioner may at times need to consult with a colleague pwho is similarly bound by confidentiality. They shall ensure that no identifiable data is discussed.

3. **Payment** I am required to pay by EFTPOS / Credit Card on the day of my appointment or in advance of telephone /e-health /Skype appointments or written reports. I authorise Counselling in Melbourne to charge my credit/debit account card for professional services within 24 hours of a scheduled appointment. I accept you will charge my card for scheduled appointments / reports. In the event of a late cancellation or missed appointment I will be billed as outlined in the cancellation policy below. My payment details are:

Name on card: _____

Card No ____ - ____ - ____ - ____ **Expiry Date** ____ / ____ **CVV No** ____

4. **Rebates** It is the client's responsibility to obtain a GP review after 6 sessions and to keep a record of how many sessions they have had per calendar year. Those utilising a Mental Health Care Plan must return to their GP for review after their 6th session to continue to access Medicare rebates. If after the 10th session, further sessions are required (noting that 10 are available within a calendar year), then you must return to your GP for another Mental Health Care Plan to continue this scheme. Where you are not claiming a Medicare rebate, you may be entitled to claim a rebate with your private health insurance, discuss your entitlements with your insurance provider.
5. **Cancellation policy** Counselling in Melbourne values your treatment, as well as clients on the waiting list. Given our practitioners set-aside their time for you, if you decide not to use it at short notice then it's less likely it can be used by anyone else. This means a loss to three people:
 - a) The client who is delaying their therapeutic progress
 - b) Another client who has been on the waiting list to see the practitioner and who has not received enough notice to change their plans to attend
 - c) The practitioner's lost income and the time set aside to see you and spent preparing for the session.

Courtesy SMS and email reminders will be sent, unless requested otherwise. In accordance with the Australian Psychological Society (APS) schedule, a fee of 50% will be charged for any late cancellation with less than 48hrs notice if we are unable to reallocate your appointment to another client, the full appointment fee will apply if you cancel with less than 24hrs notice or fail to attend. This may apply regardless of whether you receive a reminder SMS. Therefore, please remember to record appointments in your diary to ensure you can attend. We understand that sometimes you may be unable to keep an appointment because of sudden illness or an unexpected personal emergency. If this happens to you, please contact your practitioner as soon as possible to explain the situation. We will notify you if cancellation fees apply or if we agree to waiver the fees within 48 hours of the missed appointment. Please note rebates cannot be claimed for non-attendance fees.

6. **In case of emergency** I understand that Counselling in Melbourne practitioners do not provide emergency services and I have been informed to call 000 or attend my local hospital emergency department instead.

I, (print name in block capitals) _____, have read and understood the above information. I agree to these conditions for the psychological / counselling services provided.

Signature: Date:

We appreciate your respect and understanding.