

**Consent Form**

**Psychological service**

As part of providing a psychological service to you, Educational Case Management Pty Ltd needs to collect and record personal information from you that is relevant to your situation, such as your name, contact information, medical history and other relevant information as part of providing psychological services to you. This collection of personal information will be a necessary part of the psychological assessment and treatment that is conducted.

**Purpose of collecting and holding information**

Your personal information is gathered as part of your assessment and treatment, is kept securely and, in the interests of your privacy, used only by your psychologist and the authorised personnel of the practice (as necessary). Your personal information is retained in order to document what happens during sessions, and enables the psychologist to provide a relevant and informed psychological service to you. A more detailed description is provided in the practice’s “Privacy policy for management of personal information”, by accessing the Privacy Policy on our website: www:psychologistnewcastle.com.au or by contacting Educational Case Management Pty Ltd. The Privacy Policy contains information about how to access and seek correction of your personal information, and how to lodge a complaint about our management of your personal information.

**Consequence of not providing personal information**

If you do not wish for your personal information to be collected in a way anticipated by this letter or the Privacy Policy, Educational Case Management Pty may not be in a position to provide the psychological service to you. You may request to be anonymous or to use a pseudonym, unless it is impracticable for Educational Case Management Pty to deal with you or if Educational Case Management Pty is required or authorised by law to deal with identified individuals. In most cases it will not be possible for you to be anonymous or to use a pseudonym, however if Educational Case Management Pty Ltd agrees to you being anonymous or using a pseudonym, you must pay consultation fees at the time of the appointment.

**Access to client information**

At any stage you are entitled to access your personal information kept on file, subject to exceptions in the relevant legislation. The psychologist may discuss with you different possible forms of access.

**Disclosure of personal information**

All personal information gathered by the psychologist during the provision of the psychological service will remain confidential except when:

1. it is subpoenaed by a court; or
2. failure to disclose the information would in the reasonable belief of the (“Insert name of Psychologist/Practice”) place you or another person at serious risk to life, health or safety; or
3. your prior approval has been obtained to
	1. provide a written report to another professional or agency. e.g., a GP or a lawyer; or
	2. discuss the material with another person, eg. a parent, employer or health provider; or
	3. disclose the information in another way; or
4. you would reasonably expect your personal information to be disclosed to another professional or agency (e.g. your GP) and disclosure of your personal information to that third party is for a purpose which is directly related to the primary purpose for which your personal information was collected;
5. disclosure is otherwise required or authorised by law.

Your personal information is not disclosed to overseas recipients, unless you consent or such disclosure is otherwise required by law. Your personal information will not be used, sold, rented or disclosed for any other purpose.

**Fees**

Cost of a Medicare/Health Fund consultation (min 50 minutes) is $165.00, payable on the day.

Cost of a Medicare/Health Fund consultation-concession (min 50 minutes) is $120.00, payable on the day.

The cost of a Third Party or NDIS consultation is determined by the governing body.

**Cancellation Policy**

If, for some reason you need to cancel or postpone your appointment, please give the psychologist at least 24 hours notice, otherwise you may be charged the cost for the session. Please refer to the Cancellation Policy on our website: http//www:psychologistnewcastle.com.au

**What you need to bring:**

* A referral from your GP and relevant reports, if your doctor was sending the referral straight to us it is your responsibility to make sure it is here for your appointment
* Medicare Card
* Health Fund Card (if applicable)
* Pension or Health Care Card (if applicable)
* Completed patient information forms (enclosed if required to be completed)

You will need a referral from your doctor if this is your FIRST VISIT or if it is twelve months or more since your last referral.

I,……………………*…….*………………………….., have read and understood this Consent Form.

I agree to the above conditions for psychological service provided by Educational Case Management Pty Ltd

Signature ……………………………………………...............… Date ……./………/……..

***Please note:*** *If, after reading this form you are at all unclear about any of the information provided, please contact the psychologist prior to your appointment.*