



## Informed Consent Child and Adolescent Client

**Name of Client:** .....

As your child is a client at Outlook Psychology have certain rights that are important to understand. This document is designed to inform you about the management of the information you disclose to your psychologist. Psychological consultations address issues of a highly personal nature and it is important that you understand your rights regarding your records and personal information collected

### **Purpose of Collecting and Retaining Information**

As part of providing a psychological service to your child, the psychologist will need to collect and record personal information that is relevant to your child's current situation. Collection of personal information is a necessary part of psychological assessment. Information is gathered as part of the assessment, diagnosis and treatment of your child, and is seen only by Outlook psychologists. The information is retained to document what happens during psychological consultations and enables the psychologist to provide a relevant and informed psychological service.

### **Exchange of Client Information**

There may be times where, as part of the assessment and therapy process, it may be helpful for your psychologist to liaise with other people or agencies that are relevant to your therapy goals. Additional consent forms will be requested in these instances.

Please note that if you intend to claim rebates from Medicare or are covered through a third-party provider (i.e. NDIS) then your psychologist must provide summary reports to these external agencies regarding their treatment progress.

Please note that signing this form acknowledges your consent to allow us to provide these Medicare reports to the referring clinician and/or providers.

### **Confidentiality**

With the allowance of certain exceptions described below, your child has the right to the confidentiality of the information that is shared. You are assured that all personal information gathered by the psychologist during the provision of the psychological service will remain confidential and secure.

However, it is important to know there are exceptions in which psychologists will exercise their duty to waive confidentiality. This can occur when:

1. The information you and your child have provided to the psychologist is subpoenaed (officially requested) by a court of law
2. Failure to disclose certain information would place your child or another person at serious risk of harm
3. Your prior approval has been obtained to:
  - a. Provide a written report to another professional or agency, e.g. GP or a school
  - b. Discuss the material with another person, e.g. a teacher (as outlined in the Privacy Statement to Collect and Share Information form)

## **Fees and Payment Terms**

If your child has a Mental Health Treatment Plan from his/her GP, Paediatrician or a Psychiatrist and a referral has been made to a psychologist, then you will be able to claim a Medicare Rebate of \$84.80 per session for a maximum of 10 sessions per calendar year. Alternatively, you may be able to use private health insurance if you have the appropriate cover. Please note that you cannot use private health insurance in conjunction with Medicare rebates for psychological services.

- Appointments are 60 minutes. Private initial and on-going consultations are \$175 per hour.
- For clients using Department of Social Services or NDIS funding starting fee at \$210 per hour.
- Our psychologists do not write court reports. However, we provide a summary of treatment for third parties with your permission. The fee is \$200 per hour of preparation time. Discuss with your psychologist your requirements. All assessment and reporting writing services require a 50% deposit prior to your Psychologist commencing work on your report. Full payment is required prior to any reports or results being released to you.
- Assessment fees vary according to requirement. Discuss with your psychologist this requirement.

Payment by credit card or EFTPOS is required at the time of each session. We also offer Private Health Insurance rebates (if eligible) or Medicare rebates (if eligible) at the practice. You will need your Medicare card and a debit card to receive the Medicare rebate after full payment is made.

For services funded by a third party our payments terms are a strict 7-day term (unless prior arrangements have been made with Practice Manager). Full payment must be made within 7 days of invoice date or a late payment fee of \$22 (inc. GST) will apply.

## **Cancellation Policy**

If, for some reason, you need to cancel or postpone your appointment, please give at least 24 hours' notice. If you cancel a regular appointment with 24 hours' notice, then a cancellation fee will not apply. If you cancel an appointment at short notice, i.e. less than 24 hours prior to your appointment, you will be charged the full fee. The reason for this is that we allocate one hour to each client and if there is short notice of a cancellation this time cannot be filled with a client on the waiting list.

If a cancellation was made due to unavoidable circumstances, then we will try our best to reschedule the appointment. If two consecutive cancellations are made, then it is at Outlook Psychology discretion to request fees are prepaid for future sessions.

**I acknowledge that I have read, understand and agree to the above information:**

Name of Client (or parent/guardian): .....

Signature of Client (or parent/guardian): .....

Date: .....