



**Psychological service**

The service provided by Janelle Middleton is conducted within scheduled session times. It is not a crisis or case management service. For urgent or crisis care please contact 000 or your Doctor. Alternately you can contact Lifeline on 131114 or a crisis support service of your choosing.

**Collecting and holding information**

As part of providing a psychological service to you Janelle Middleton 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 a necessary part of providing psychological services to you. 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. 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. If you do not wish for your personal information to be collected in a way anticipated by this letter your Psychologist may not be in a position to provide the psychological service to you. Please discuss any concerns with your Psychologist before you commence.

**Disclosure of personal information**

Your personal information will not be used, sold, rented or disclosed for any other purpose. All personal information gathered 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 Psychologist place you or another person at serious risk to life, health or safety; or
3. your prior approval has been obtained to
  - a. provide a written report to another professional or agency. e.g., a GP or a lawyer; or
  - b. discuss the material with another person, e.g. a parent, employer or health provider; or
  - c. 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; or
5. disclosure is otherwise required or authorised by law.

**Fees**

The cost of a consultation (55 minutes duration) will be \$145.00, and is payable at the end of the session by cash or Credit/Debit Card. With a GP referral you may be entitled to a Medicare rebate of \$84.80).

Alternately you may be able to claim a rebate with your Private Health Fund using your 'extras' cover. For referrals under Brisbane MIND or WorkCover Qld the relevant agency will be billed directly for the service; there are not out of pocket expenses payable.

**Cancellation Policy**

Appointments that are missed without notification or with less than 24 hours notice may be charged a cancellation fee (the fee varies from \$40 to the full cost of the consultation depending on the notice given and cancellation circumstances). Non-attendance fees do not attract a Medicare rebate. Please call/text 0411699591 if you are unable to attend your appointment at the scheduled time.

**Fragrance Free**

As your Psychologist is sensitive to fragrances and scented products and experiences negative health symptoms as a result of exposure you are respectfully asked not to wear perfumes or other strongly scented products (incl. strongly smelling deodorants) to your session.

**APS Charter for Clients of Psychologists**

The Charter for Clients explains your rights as client of a psychologist. Please refer to the copy provided by your Psychologist. Or you can access a copy from the APS website:

<http://www.psychology.org.au/Assets/Files/APS-Charter-for-clients.pdf>

I (print name)..... have read and understood the information provided above. I agree to these conditions for the psychological services provided by Janelle Middleton.

Signature.....

Date:.....