

## INFORMED CONSENT FOR PSYCHOLOGICAL SERVICES

### Nature and purpose of the Psychological Service

As part of providing a psychological service including assessments and counselling to you, Crescent Psychology will need to collect and record personal information pertaining to you. This information is a necessary part of the psychological assessment and treatment that is conducted. Psychotherapy varies depending on the personalities of the psychologist and patient, and the particular problems you bring forward. There are many different methods we may use to deal with the problems that you hope to address. Psychotherapy calls for a very active effort on your part. In order for the therapy to be most successful, you will have to work on things we talk about both during our sessions and at home. If you have questions about our procedures, we should discuss them whenever they arise. You are able to cease therapy at any time, including during a session, if you feel uncomfortable.

### Confidentiality and Privacy (For further information please refer to *Crescent Psychology Privacy Policy*)

As part of providing psychological services, relevant personal information to the current situation will be collected and recorded. The information will assist in providing an appropriate and thorough service. Information will be stored in a secure location. We are required to keep your file for a minimum of 7 years, or if you are under the age of 18 at the time of treatment, until you are 25 years of age. You may access the information in your file on request, subject to the exceptions in the National Privacy Principles.

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

1. it is subpoenaed by a court, or disclosure is required or authorised by law; or
2. failure to disclose the information would place you or another person at risk of harm; or
3. given your prior approval, or consent of a parent or guardian who is legally authorised to act on your behalf in order to provide a written report to another professional or agency, or discuss information with another person e.g., parent or employer; or
4. you would reasonably expect your personal information to be disclosed to another professional or agency and disclosure is directly related to the primary purpose for which it was collected such as to inform your GP of treatment and progress; or
5. clinical consultation with another professional is required to provide better clinical services (identifying details will remain confidential).

**If during the course of your work with Crescent Psychology we become aware of risk to someone's life, health, or wellbeing, we are required by policy of the state and federal governments to report the matter to the appropriate agencies.**

### Session Fees

The [AAPI 2024 - 2025](#) recommended fee for psychological services is \$315 per session. However, Crescent Psychology sessions are billed at a rate of \$220 (50-minute duration) or \$130 (20/30-minute duration). **Online bookings require a \$50 deposit** which will be held in the event of late cancellation or non-attendance. Remaining fees are payable at the time of consultation. Some health insurance policies cover counselling depending on the policy. Please check with your insurance company as to what cover you are eligible. DVA card holders are eligible for sessions with a referral from their GP.

### Medicare Rebates

Under the Medicare Benefits Schedule (Better Access), Medicare rebates are available to clients with an assessed mental health disorder. Medicare rebates are accessed with a Mental Health Treatment Plan and referral from a GP, Psychiatrist, or Paediatrician. The rebate is limited to 10 sessions per calendar year and only available with a valid referral.

### Cancellation Policy

If for some reason you need to cancel or postpone your appointment, please give at least 48 business hours' notice. A \$50 cancellation fee will be charged for late cancellations/no shows to an appointment. The cancellation fee will be retained from your booking fee. Please make every effort to notify the practice if you are unable to attend an appointment as other clients are waiting on appointments. To cancel or reschedule an appointment, please call Crescent Psychology on 0422 708 123 or advise us by text or email – [office@crescentpsychology.com.au](mailto:office@crescentpsychology.com.au).

### Emergency

For emergencies, contact 000, or the Queensland Mental Health Access Line 1300 MH CALL (1300 642 255), Lifeline 13 11 14 or 13YARN (13 92 76)

### Consent

I, (full name of client or guardian) \_\_\_\_\_ have read and understood the above consent form provided by Crescent Psychology and have had the opportunity to have any questions I may have about it answered.

**I agree with the psychological service provided and the associated fee I am required to pay.**

Signed (Client/ or Parent/ Guardian\*) \_\_\_\_\_  
\*For clients unable to give informed consent.

Full name \_\_\_\_\_

Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_