



# The Children's Dietitian Cancellation Policy

Effective Date: 2/7/2024

We recognise that in the course of your child's nutrition and feeding journey, there may be instances when you need to adjust your schedule for appointments with Aimee or Bonnie at The Children's Dietitian. Your dedication to this journey is valued, and we are committed to providing you with the highest level of care. To streamline scheduling and ensure fair treatment for all clients, we have implemented a comprehensive cancellation policy that aims to strike a balance between your needs and the efficient operation of our practice. This policy also exists to further strengthen your commitment to your child's nutrition and feeding journey.

## 1. Appointment Scheduling and Cancellation:

To secure your appointment, you have the option to utilise our user-friendly online scheduling system (Link: <https://thechildrensdietitian.as.me/> for online or <https://www.halaxy.com/book/mrs-aimee-peters/dietitian/1414481/1008921/select-time> for kingswood appointments) or reach out to us directly on [admin@thechildrensdietitian.com.au](mailto:admin@thechildrensdietitian.com.au) or 0482 688 481. If your plans change and you must reschedule or cancel, we kindly request that you provide us with at least 24 hours notice. This consideration allows us to allocate the appointment to another client who may require our services.

## 2. Late Cancellations and No-Shows:

Appointments that are cancelled with less than 24 hours notice will be categorised as late cancellations. In cases where clients do not attend their scheduled appointments without prior notice, a no-show status will be recorded.

### 3. Late Cancellation and No-Show Fees:

We believe in transparency. For late cancellations with less than 24 hours notice and no-shows for private paying clients, a fee of 50% of the appointment cost will be applied. NDIS client cancellations and no-show fees are as per the service agreement.

### 4. Deposits:

For private paying clients a 50% deposit will be due at time of booking for both new and review sessions. For NDIS clients a deposit is not required. If you cancel more than 24 hours ahead of an appointment, a refund minus transaction fees will be provided.

### 5. Payment of Fees:

Any applicable late cancellation or no-show fees will be taken from your deposit or invoiced within 7 business days post the missed appointment. The payment of these fees signifies your acknowledgment and agreement to our cancellation policy.

### 6. Emergency Situations and Exceptions:

We understand that emergencies can arise unexpectedly. If you find yourself in such a situation, preventing you from attending your appointment, we urge you to reach out to us as soon as possible. We are open to discussing exceptional circumstances and finding suitable solutions.

### 7. Rescheduling Appointments:

Flexibility is at the heart of our service. If rescheduling becomes necessary, we will endeavour to accommodate your request by identifying an alternate appointment time that aligns with your availability.

### 8. Value of Consistency:

We firmly believe in the power of consistency. Regularly attending your scheduled appointments significantly enhances the likelihood of achieving your health and wellness objectives. The steady rhythm of sessions ensures that we can provide the optimal level of care and support

9. Reminder Notifications:

To facilitate your schedule, we offer courtesy reminder notifications 48 and 24 hours prior to your appointment by email, phone or text. It's important to keep your contact details up to date in our system for effective communication.

10. Virtual Sessions:

As a potential alternative to in-person appointments, we also provide the option for virtual sessions. If attending in-person becomes a challenge, please feel free to inquire about this convenient alternative during the rescheduling process.

11. Feedback and Concerns

We value your input. If you have any feedback or concerns about our cancellation policy or any other aspect of your experience with us, we encourage you to share them openly. Your insights help us continually improve.

By signing below, you signify your acknowledgment, comprehension, and agreement to abide by the terms of our cancellation policy.

Child/Client's Full Name: \_\_\_\_\_

Parent/Carer's Full Name: \_\_\_\_\_

Parent/Carer's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Should you have any questions or require further clarification, please don't hesitate to reach out to us. Your trust is appreciated, and we eagerly anticipate supporting you on your journey to optimal health and well-being.

Warm Regards,

Bonnie Dorise & The Children's Dietitian Team

