



CONSENT FORM

Employee Assistance Program

We invite you to take a few minutes to learn the terms and conditions applicable to your Employee Assistance Program (EAP).

The main purpose of this program is to allow you to evaluate your situation and develop an appropriate action plan to help you solve your problems.

Your EAP counsellor is a member in good standing of a professional order and/or association and offers short-term solution-focused counselling. Should long-term or specialized assistance be required, your EAP counsellor will guide you towards an alternate private, public or community external resource.

EAP professionals must adhere to strict government legislation and professional standards, among others regarding the question of privacy. You can be assured that your identity and the content of the EAP sessions cannot be disclosed to your employer, or any other party (i.e.: doctor, parent, etc.), without your written consent or a judge's order. However, since the EAP is considered to be a single institution, the counsellor may share information with other professionals in the same institution without the client's consent, to properly process your case and ensure the quality of the interventions. The only information that will be shared with the sponsoring organization is general and de-personalized statistics. Therefore, your participation in the EAP will not affect your reputation, your job security or advancement opportunities.

It is important to note that none of the work done by or with the EAP counsellor to assist you can be used for any other purpose or procedure, as a legal, lawsuit, divorce, union/labour, etc. Furthermore, your EAP cannot be used for an independent evaluation or expert testimony in any cause or trial involving you.

Should your safety and/or the safety of another party be threatened, your EAP counsellor has the obligation of reporting the situation to the concerned authority (i.e.: parents, doctor, police, youth protection agency, etc.) and to Optima's high management.

Appointments are set at times convenient to both parties. Should you be unable to attend a set appointment, **it is your responsibility to notify the counsellor at least 24 hours in advance. A missed or cancelled appointment (with less than 24-hour notice) will be considered as an actual appointment and may reduce the number of hours of consultation that you are entitled to.**

The cost of approved counselling sessions and any other service provided by this EAP is paid by the covered employee's employer. If at the end of your sessions you require additional support in regards to your situation, the EAP counsellor will refer you to an appropriate resource.

I, the undersigned, hereby recognize that I have been made aware of the terms and conditions applicable to this EAP and accept the help offered with complete knowledge of these terms and conditions.

I also authorize the transmission of relevant information between my counsellor and Optima. This consent will remain valid throughout the EAP counselling process with Optima.

Name of client (in block letters)

Date

Signature of client

Signature of counsellor