



## **Psychological/Counselling Services**

As part of providing a psychological/counselling service (*assessment and/or therapy*) to you, Advanced Psychology 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 part of providing services to you. This collection of personal information will be a necessary part of the assessment and treatment that is conducted.

### **Purpose of collecting and holding information**

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 practitioner and the authorised personnel of the practice (as necessary). Your personal information is retained to document what happens during sessions and enables the practitioner to provide a relevant and informed service to you.

Consent is also required for permission to use your Bank/Credit/Debit account details, Medicare number, personal mobile number, and/or email to send you appointment reminders/cancellations/receipts, etc—via the practice management software system (Halaxy).

Note: These details can be deleted by email request if you no longer require services through Advanced Psychology.

### **The consequence of not providing personal information**

If you do not wish for your personal information to be collected in a way anticipated by the Privacy Policy, Advanced Psychology may not be able to provide the service to you. You may request to be anonymous or to use a pseudonym unless it is impracticable for Advanced Psychology to deal with you or if the practice is required or authorised by law to deal with identified individuals. In most cases, it will not be possible for you to be anonymous or to use a pseudonym.

### **Access to client information**

At any stage, you are entitled to access your personal information kept on file, subject to exceptions in the relevant legislation. The practitioner may discuss with you, different possible forms of access.

### **Disclosure of personal information**

All personal information gathered by the practitioner during the provision of the service will not be disclosed except when:

1. A court subpoena it; or
2. failure to disclose the information would, in the reasonable belief of the treating psychologist, place you or another person at serious risk to life, health or safety; or
3. your prior approval has been obtained to
  1. provide a written report to another professional or agency. e.g., a GP or a lawyer; or
  2. discuss the material with another person, e.g., a parent, employer or health provider; or
  3. 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 that is directly related to the primary purpose for which your personal information was collected; or
5. disclosure is otherwise required or authorised by law.

Your personal information is not disclosed to overseas recipients unless you consent, or such disclosure is otherwise required by law. Your personal information will not be used, sold, rented or disclosed for any other purpose.

### **Telehealth Consent**

By signing this consent form, I agree that: I understand that the benefits of Telehealth/video conferencing therapy/counselling sessions can include the following:

- Continued therapeutic support as part of my treatment plan
- Avoiding the need for me to travel to my practitioner

I also understand that there are potential risks and downsides of Telehealth/video conferencing therapy sessions and that these can include:

- Telehealth/video conferencing may not feel the same as a face-to-face session
- There could be technical problems that could affect the video / sound quality or connection, and this may disrupt the session in some ways
- Although my practitioner chooses video conferencing software, which has end-to-end encryption and high-security standards, there is still a small risk of hacking or others tapping into the video connection. I understand that my practitioner is taking the necessary precautions to ensure confidentiality, including:
  - Ensuring the privacy of the Telehealth session is upheld in the same way an in-person session would be by choosing a private location or using headphones
  - Not allowing any voice or video recording of the session

I have been informed of and understand the payment / Medicare processes for my Telehealth session, and I consent to comply with these. I understand that I can ask questions about the Telehealth session anytime.

I understand that attending a session via Telehealth/videoconferencing is not compulsory, and I can withdraw consent at any time if I do not wish to continue. If there are technical difficulties interfere with the session, a phone consultation will be offered as an alternative.

### **Fees**

The 50-minute consultation in our clinic or via Telehealth is payable on the morning of your appointment date.

All fees will be payable via your nominated credit/debit card details, which are stored *before your appointment date*.

Medicare rebates may be available if you have a Mental Health Treatment Plan; rebates may be processed after payment has been completed.

Assessment costs vary; a \$250 holding fee deposit is required on the day you make a booking and is payable once your appointment has been confirmed via your nominated stored credit/debit card details.

### **Cancellation & No-Show Policy**

If, for some reason, you need to cancel or postpone your appointment, please give the practice adequate notice:

Consultation/Intake/Therapy/Counselling/Feedback – Advanced Psychology requires at least 48 hrs' notice before your appointment date, or you will be charged the full fee of your booked session.

Assessments - Advanced Psychology requires at least five days' notice prior to your appointment date, or you will forfeit your \$250 deposit.

If for some reason you don't attend your appointment, you will be charged a non-attendance fee. For all consultation services, the fee will be the full fee of the session and for assessments, you will forfeit your \$250 deposit. Cancellation fees will be deducted from your nominated debit/credit card, on the date your appointment was scheduled to begin.

### **Communication Between Sessions**

Communication via email and telephone in-between scheduled sessions will be kept to a minimum with an expectation that it is limited to administrative issues (i.e., organising appointments, advising of any recent changes, requesting information to be shared with specialists, and sharing of resources). Extensive emails will be printed to discuss in the next session; however, private information is strongly recommended not to be shared via this format due to privacy and confidentiality issues.

### **Confidential Information and Psychometric Tools**

Our administration team is responsible for managing confidential information and psychometric tools, ensuring their secure handling and storage in compliance with all privacy and security protocols.

By signing this consent form, you acknowledge and consent to the use of artificial intelligence (AI) tools in the delivery of services provided by the clinician. The clinician will ensure that the use of AI tools is aligned with ethical guidelines and professional standards as outlined by the Australian Health Practitioner Regulation Agency (AHPRA), the Australian Psychological Society (APS), and relevant Australian laws. Your privacy and confidentiality will be upheld in accordance with the Privacy Act 1988 (Cth), and AI tools will be used solely to enhance your care. You understand that you can withdraw consent for the use of AI tools at any time by notifying the clinician.

### **Surveillance Cameras**

To enhance the security of our premises, surveillance cameras are installed in the waiting area, facing the entrance and reception. Footage from these cameras is securely stored and accessible only to authorized personnel. Clients are informed of the presence of these cameras through visible signs and notices.

### **Observations and Recording**

As AP is a training clinic, there may be post-graduate Educational Psychology Students (provisional psychologists) or psychologists in training who observe your sessions as part of their training. They are also bound by the same confidentiality standards as your treating psychologist. To provide high-quality supervision sessions may be audio or video recorded.

Recordings may be used for supervision purposes or for the clinical training of other psychologists or students. They will only be heard or seen by the psychologists in training at Advanced Psychology and the supervising psychologist. All recordings will be treated as confidential and will be deleted at the end of the calendar year in which you were seen at the clinic. Some session(s) may be conducted remotely and recorded using Zoom.

More information regarding ZOOM's privacy and data security practices can be found on their website (<https://www.ZOOM.com/privacy-policy>). If part of your session will be recorded this will be discussed with you.

Should you require further information about the AP's management of your information or about our policies can contact admin on 03 7002 8006.