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# Informed Consent Form

Thank you for engaging with myMHC to assist with your needs. A consent form must be signed at the start of treatment and renewed every 12 months. It outlines important information about using our services, your rights, and responsibilities. **Remember to check all the boxes and to sign the form on the last page.** Ideally, this Consent Form is to be emailed to admin@myMHC.com.au prior to your appointment but if anything is unclear, you can ask your psychologist on the day or contact our administration team for clarification. Save a copy of this document for your future reference.

## Personal information

Personal information is recorded to ensure accurate documentation of your sessions and to support the delivery of appropriate, informed care. This might include your name, DOB, contact details, Medicare & payment information. All information is stored electronically on a secure, encrypted cloud-based server, compliant with Australian privacy standards. It is accessed only by your psychologist and authorized staff. Your client file will be securely destroyed if you have not attended treatment for seven (7) consecutive years. For adolescents, files are retained until the client reaches 21 years of age and destroyed seven (7) years after their last attendance. You are entitled to request details on how your personal information is managed, how you can access it, and how to make a complaint about the service or its handling of your information. Our practice can provide this information upon request.

## Privacy and confidentiality

Your privacy is protected in accordance with professional, ethical, and legal requirements. All myMHC psychologists are registered with the Australian Health Practitioner Regulation Agency (AHPRA) and adhere to the Australian Psychological Society Code of Ethics. You have the right to access your records at any time, subject to the Australian Privacy Principles. File requests can take up to 15 days to process and incur an administration fee. When your psychologist consults with colleagues, or undertakes supervision, your identity will remain confidential. Any case discussions are de-identified.

## Communication with Other Health Professionals

Your psychologist is required to communicate with your referring doctor if you are attending under a Mental Health Care Plan. With your consent, they may also communicate with other clinicians or those involved in your care, as this is considered good professional practice and supports effective treatment. If your case is discussed in supervision or peer review, any information will be de-identified to protect your privacy and will be discussed with you beforehand.

## Limits to confidentiality

All personal information gathered by myMHC and your psychologist during the provision of psychological services will remain confidential except in the following circumstances:

1. If it is subpoenaed by a court; or
2. Failure to disclose the information would 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 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 (e.g. mandatory reporting of child abuse).

## Telehealth Services

Your confidentiality is protected under the same laws as in-person sessions. All telehealth appointments are conducted via videoconferencing or telephone. To access video consultations, you will need a quiet, private space, a suitable device (e.g., smartphone, laptop, iPad, or computer) with a camera, microphone, and speakers, and a reliable broadband internet connection. We use a combined videoconferencing and EMDR platform called RemotEMDR to deliver all individual and group therapies. RemotEMDR works best on Chrome, Firefox, or Edge browsers (not Safari). Potential risks for telehealth include technical disruptions, delays, or unauthorised access. If technological issues arise, you will be contacted by the phone number we have on record instead.

## AI Note Taking

Your psychologist may use a HIPAA-compliant AI note-taking tool (e.g., Everbility, ANTSA, Heidi, or NovoNote) to capture session details, allowing more focus on your care. After notes are transferred to our practice system, any audio or transcripts are deleted and not stored in your clinical file. Please let your psychologist know at the start of your session if you do not want your session recorded and we will add an alert in our system.

## Email Communication

If a secure messaging system is unavailable, reports or letters may be sent via unsecured email. We aim to use secure channels whenever possible.

## Confirmation SMS Email & Reminders

Our practice management software (Halaxy) automatically sends out an SMS confirmation 3 days (72 hours) before your appointment, which you can reply by texting YES or NO. Our software also sends out an email reminder 24 hours before your scheduled appointment. Please make sure you write down your appointment details in a diary or calendar and don’t rely solely on SMS or email reminders

## Cancellation Policy

Please note that failing to reply to our SMS confirmation does not cancel your appointment and we are still expecting you to attend. If you need to cancel or reschedule your appointment, respond ‘NO’ to your SMS confirmation and rebook online at a more suitable time. Any changes to your appointment within 48 hours of the start time (or if you do not attend the appointment on the day) will incur a late cancellation fee of up to $190. Your card on file will be charged at the end of our working day and any outstanding balances on your account will need to be paid before any further appointments will be booked (unless a payment plan is in place).

## Payment policy

Unless bulk-billed or paid by a third party, all sessions must be paid in full by card at the end of your appointment. Fees are $190 (concession) or $250 (full rate) for 60 minutes, with longer sessions incurring extra costs. Eligible Medicare rebates are processed at payment and usually received within 24–48 hours. If a third-party funder declines payment, you are responsible for the account. (i.e. Medicare, VOCAT, DVA, NDIS, WorkCover, TAC etc.) declines to pay for your consultations, please be aware that you are responsible for payment of your account.

## Credit/Debit Card Storage

Your card details will be stored in our secure payment software (Halaxy) and charged at the conclusion of your appointment by your psychologist. Invoices for Cancellation fees are emailed the day of the appointment and charged at the end of our working day. By signing this consent form you agree for us to use of your card for payment of psychological services you have received and any cancellation fees you may have incurred.

## Bulk Billing - Assignment of Benefit

If your psychologist, at their discretion, has agreed to bulk bill your session(s), you will not have to pay anything for your session - your psychologist will receive payment directly from Medicare. Signing this consent means that you agree to assign your right to benefits to the practitioner who rendered the services.

## Hardship Assistance Policy

## If you are experiencing financial hardship, please speak with your psychologist. Options may include bulk-billed sessions, sliding scale fees, payment plans for unavoidable cancellations, or limited bulk-billed appointments. We want to support you in continuing your therapy, so please contact us to discuss your needs.

## Electronic Recording

To protect the privacy of both you and your psychologist, you are not permitted to record audio or video of your sessions. You are, however, encouraged to take notes during your session(s). By signing this consent form, you are agreeing to not record your sessions in any way. Your therapist may record your sessions, but only after obtaining your verbal consent.

## Requests for Letters, Reports & Assessments

It is advisable to let your psychologist know well in advance if you require a letter, report or assessment. This ensures your psychologist has all the information that is needed. We require 10 working days to complete reports and letters as they are often done out of hours or when a cancellation occurs. Full payment is required prior to any letters or reports being released. Letter and report costs are in addition to the cost of your consultations. It is also unethical for your psychologist to leave out pertinent information that is relevant to your situation, symptoms or treatment when writing a report or letter.

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## Signature required on next page …

## Consent to Receive Psychological Services via Telehealth

[ ]  I have been informed about the service offered by myMHC and can view this at any time on the myMHC website. ([www.myMHC.com.au](http://www.myMHC.com.au))

[ ]  I have read the above consent form and been provided with the opportunity to discuss any questions or concerns with the practice or my psychologist.

[ ]  I understand that any personal information collected by my psychologist is securely stored on Australian servers (that comply with Australian Privacy Principals) and that my information can only be accessed by my psychologist and reception staff at myMHC.

[ ]  I understand my psychologist needs to communicate with other professionals involved in my care regarding information relevant to my treatment.

[ ]  I understand there are limitations to privacy and confidentiality, especially if there is risk to myself or others, and that my psychologist will obtain my consent prior to sharing confidential information with others, unless disclosure is required by law.

[ ]  I understand my psychologist may undertake supervision and peer consultations from time to time. If my treatment details are to be discussed with another psychologist, my personal information will be de-identified to protect my identity.

[ ]  I understand that I require a suitable device with a camera, microphone, and speakers (as well as a reliable broadband internet connection) to undergo therapy via video.

[ ]  I understand that RemotEMDR is used for all video consultations (even if I am not doing EMDR therapy).

[ ]  I understand that RemotEMDR may not work if I try to open the link in Safari (🡪 use Chrome, Edge or Firefox instead).

[ ]  I understand that my psychologist may use secure AI note taking software during our consultation and that all transcripts or recordings will be deleted within 12 hours of my appointment ending.

**[ ]** I agree to advise my treating Psychologist as soon as possible if I require a report or letter. I acknowledge the time frames needed, the costs involved, and that pre-payment is required prior to releasing any document.

[ ]  If my session is bulk-billed, *I agree to assign my right to benefits to the practitioner who rendered the services*.

[ ]  I understand that I am encouraged to ask questions and discuss any obstacles that may be interfering with me receiving treatment, when they arise.

[ ]  I agree to the above conditions for telehealth psychological services to be provided by Julie-Anne Peake (Clinical Psychologist) at myMHC.

**Print Name:**

**Client Signature:**

**Date:**

**Psychologist Name:** JULIE-ANNE PEAKE

**Signature:**

 *Thank you for using our service.*