CONSENT TO UNDERTAKE COUNSELLING

INFORMATION ABOUT COUNSELLING

Counselling is an interactive process where you, as the client, have the opportunity to explore issues of concern to you under the guidance of a trained and experienced psychologist who assists you in identifying unhelpful patterns and contributing factors, underlying causes, and who works with you to develop helpful strategies and more useful ways of looking at these concerns to alleviate distress and aid in the development of greater emotional and personal well-being.

While most clients find counselling immensely beneficial and life-changing, success cannot be guaranteed and largely depends on how open you are, how committed you are to therapy, how hard you are prepared to work, the fit between you and your psychologist, and how committed you are to change. Counselling is a process that leads you to look at life's challenges and personal issues closely and, as such, can have risks associated with it due to the exposure to, at times, intense and difficult feelings and thoughts being explored. These risks may include a wide range of strong emotions and thoughts, feeling tired or drained, headaches, nausea, or other physical and emotional symptoms. If you experience any of these symptoms at any time, please let your psychologist know.

CONFIDENTIALITY & RECORDS

What you discuss in your counselling sessions is private and confidential. As such, the psychologist requires your written permission to speak to a third party (e.g.: your family) about your treatment. There are only two exceptions to this: 1) if there is a risk of harm to you or to someone else and 2) if a court of law subpoenas documentation. Please bear in mind that if you have a mental health care plan, your psychologist is required to provide a progress report about your treatment to your GP as part of the Medicare requirement.

Psychologists do keep records about your treatment which are securely kept under lock and key with only your psychologist having access to this record. Psychologists may also discuss de-identified information about a client's therapy with a supervisor as part of a quality assurance process. Psychologists are bound by the Australian Psychological Society's Code of Ethics and current Privacy Legislation. Ask us about our Privacy Policy for more information.

FEES & CANCELLATION POLICY

A consultation is charged at \$150.00 per session for a consultation with a general psychologist and \$190 per session for consultation with a clinical psychologist. Fees are payable at the time of your consultation. Medicare and private health insurance rebates may apply. A minimum of 24 business hours notice is required to cancel or reschedule an appointment. A cancellation fee of 50% of your regular consultation fee applies to all missed appointments and cancellations of less than 24 business hours notice. You accept full liability for session fees associated with WorkCover and TAC claims which are rejected by WorkCover or TAC. Payments may be made by EFTPOS, credit card or cash. In most cases, Medicare rebates can be processed at our practice for your convenience. Accounts that remain unpaid and are referred to a debt collection agency will incur additional charges associated with debt collection. Patients are fully liable for any unpaid accounts and associated debt collection charges.

AUDIO RECORDING OF SESSIONS

You have the option of audio recording your session in order to assist you to get the most out of each session. This is an optional extra for your own personal use in gaining therapy outcomes. Your psychologist does not listen to your recording unless specifically requested by the psychologist and only with your permission if this helps in quality assurance process for your therapy. Your psychologist will never record a session without your explicit request. It is a condition of accepting this recording when you leave the session that you do not use this recording to generate personal income from the recording or in any legal action against the psychologist. We reserve all rights and do not accept any responsibility for the recording once it leaves our premises. This option is only available to clients aged 18 years and over.

CRISIS MANAGEMENT

The Red Couch Counselling & Psychology Clinic is not able to provide crisis or emergency support. If you feel at risk or require additional support, your psychologist will develop strategies and a plan with you to assist in the management of a crisis if this is appropriate as part of your treatment. In case of an emergency or crisis, please contact 000, your local hospital (The Alfred, Ph: 1300 363 746) or Lifeline on Ph: 131 114.

ACKNOWLEDGEMENT:

I have read and fully understand the information provided above.

There is an area of the control of t					
I hereby consent t	o undertake coun	selling and ag	ree to abide by	the rules outlined ab	ove.
Signature:					
Name:					
Date:	/	/			
Witness:					

(Print Name & Sign)





The Red Couch

Counselling & Psychology Clinic

Postal Address:

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370 St. Kilda Rd

Melbourne VIC 3004

1800 232 152

www.theredcouch.com.au

CLIENT REGISTRATION FORM

Client Details:					
NAME: _					
ADDRESS: _					
SUBURB: _	POSTCODE:				
Do you give peri	mission for mail to be sent t	to this address?			
□ Yes □	□ No				
D.O.B.: _	//				
PHONE: _					
Do you give peri	mission for messages to be	left at this number?			
□ Yes □	□ No				
EMAIL: _					
Do you give peri	mission for messages to be	left at this email address?			
☐ Yes ☐] No				
Emergency Con	ntact Details:				
NAME: _					
PHONE: _					
RELATIONSHI	P:				
How did you he	ar about us?				
☐My Doctor	☐ Website	☐Facebook Follower			
□Flyer	☐ Friend	□Facebook Ad			
☐YouTube Vid	eo Magazine Article	□Workshop/Seminar			
□Other – Please	e specify:				
		INTED OVERLEAF AND SIC F THE FORM. THANK YOU!			