

## NDIS SERVICE AGREEMENT-ADULT

This Agreement is made according to the rules and the goals of the National Disability Insurance Scheme (NDIS).

**NAME:** \_\_\_\_\_

**DOB:** \_\_\_\_\_ **AGE:** \_\_\_\_\_ **MALE/FEMALE** \_\_\_\_\_

**COUNTRY OF BIRTH:** \_\_\_\_\_ **ETHNICITY:** \_\_\_\_\_

**NOMINATED REPRESENTATIVE/CARER (if applicable):** \_\_\_\_\_

\_\_\_\_\_

**EMERGENCY CONTACT:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **SUBURB:** \_\_\_\_\_ **POST CODE:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**EMERGENCY CONTACT:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**HEALTH PROFESSIONALS INVOLVED IN MY CARE:** \_\_\_\_\_

\_\_\_\_\_

**DIAGNOSES (MEDICAL/MENTAL HEALTH):** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**NDIS PLAN PROVIDED** \_\_\_\_\_ **YES/NO** \_\_\_\_\_

**WHO PAYS INVOICES (tick)**       Self-Managed       Plan Managed

Plan Nominee       NDIA Managed

Please provide contact details if Plan Managed

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## TERMS OF SERVICE

Welcome to The Psychology Hub. Our terms of service and your rights and responsibilities in relation to information security, access and confidentiality as well as your obligations regarding fees, cancellations and the supports you receive.

### INFORMATION SECURITY AND ACCESS

**PERSONAL INFORMATION:** All information obtained during your treatment is kept confidential and secure, except when:

- (1) It is subpoenaed by a court;
- (2) Failure to disclose the information would place you or another person at risk of harm; or
- (3) Your prior approval has been obtained to:
  - (a) provide a written report to another professional or agency—e.g. to a lawyer; or
  - (b) Discuss the material with another person—e.g. a parent or employer.

Therapists are at times required to provide progress reports to Participants and the NDIA. This progress report outlines plan objectives and goals and whether goals are being met. Health research using de-identified data may be undertaken by this practice, by funding bodies or by this practice's technology providers, which you consent to as a patient of this practice. A copy of our privacy policy can be given on request.

**INFORMATION SECURITY AND ACCESS:** In the course of treatment, personal information is collected to enable treatment. All notes taken in the course of treatment and all communications relating to treatment become a part of the patient's clinical records. Clinical records are stored electronically in the patient file on Halaxy, which you (or your nominated representative) consent to as patient of this practice. You have a general right to access the patient records (subject to some exceptions which mainly relate to privacy, health, child consent or legal considerations) and a request must be made in writing. You have a right to amend your records and personal information if incorrect. We are required to keep patient personal information for 7 years.

### YOUR RESPONSIBILITIES/RIGHTS

**CONFIRMING APPOINTMENTS:** We endeavour to confirm appointments via SMS or email. However, it remains your responsibility to be aware of the scheduled appointments.

**TIME AND PUNCTUALITY:** A consultation will usually last 60 minutes. If you are late, the consultation will usually still finish at the scheduled time.

**CANCELLATION POLICY:** We ask that you kindly give us as at least 48 hrs notice via email or telephone for appointment cancellations and reschedules. Short-notice cancellations (less than 2 business days' notice) and no shows will result in a cancellation fee of 90% charged against the NDIS Plan (or credit/debit card on file if self-managed).

**COMPLAINTS:** You (or a family member, friend or advocate) can make a complaint to any of our staff members in person, phone, and email or in writing. A copy of our complaints procedure can be given on request and found on our website. If you are not satisfied with the outcome you can lodge a complaint with the NDIS Complaints Commissioner 1800 035 544.

**ADVOCATE:** You can get an advocate (an independent person who will speak for you) if you need help saying what you want.

**SERVICE/CONSULT FEES:** For Self-Managed and Nominee Managed Funds Fees are payable at the time of your appointment. For all other funds invoices to be paid within 7 days. Payments accepted

**P:** 1300 3666 14 **W:** [www.thepsychologyhub.com.au](http://www.thepsychologyhub.com.au) **E:** [info@thepsychologyhub.com.au](mailto:info@thepsychologyhub.com.au)  
**ABN:** 26 519 219 656

include cash, BPAY, automatic debit of funds via Halaxy using the debit/credit card you provided. Please note, if your NDIS plan does not have the required funds to pay for the service you agree that you will then be personally liable for the charges.

**CHANGES TO THIS AGREEMENT:** Changes to this agreement can be made in writing and when both parties (The Psychology Hub and Yourself) agree to the changes. You can end this agreement by giving us 7 days' notice.

**SERVICE/CONSULT FEES (circle those that apply):**

- 1. ALL PLANS (self, agency and plan managed) : Price Limit Set out in NDIS Price Guide
  - a. Improved Daily Living Skills-
    - i. Individual Counselling \$156.15
    - ii. Individual Assessment, Therapy And/Or Training \$214.41
  - b. Improved Relationships-
    - i. Specialist Behavioural Intervention Support \$214.41
    - ii. Behaviour Management Plan & Training in Behaviour Management Strategies \$193.99

\*Progress Reports are charged at the hourly rate for the relevant support item in the NDIS Plan. In certain circumstances, we may be entitled to charge for expenses incurred in the provision of supports. These may include certain transport and travel costs. Travel claims are for up to 20 minutes of time against the appointment the therapist is travelling to, at the hourly rate for the relevant support item. The therapist can also claim for return travel if your appointment is the final appointment in a day.

I agree travel costs can be claimed YES/NO

**OUR RESPONSIBILITIES**

- ✓ PROVIDE THE SERVICE ASKED FOR
- ✓ BE OPEN AND HONEST ABOUT HOW WE CAN HELP
- ✓ BE POLITE AND RESPECTFUL
- ✓ RESPECT YOUR VALUES AND BELIEFS
- ✓ ASSIST YOU TO MAKE INFORMED CHOICES
- ✓ PROTECT YOU FROM VIOLENCE, ABUSE OR DISCRIMINATION
- ✓ PROVIDE JOINT DECISION MAKING ABOUT THE SERVICES AND SUPPORT WE OFFER
- ✓ LISTEN TO FEEDBACK AND RESOLVE ANY ISSUES
- ✓ KEEP INFORMATION CONFIDENTIAL AND SECURE
- ✓ ENSURE THERE IS NO CONFLICT OF INTEREST BETWEEN YOU AND STAFF
- ✓ OBEY ALL RELEVANT LEGISLATION
- ✓ PROVIDE INVOICES/STATEMENTS
- ✓ INVOICE THE CORRECT AMOUNT
- ✓ APPLY GST WHEN REQUIRED
- ✓ REGULARLY REVIEW HOW THE SERVICE IS WORKING FOR YOU
- ✓ LET YOU KNOW IF WE WANT TO END THIS AGREEMENT

SUPPORTS YOU WILL RECEIVE:  
\_\_\_\_\_

WHEN, WHERE & HOW YOU WILL RECEIVE THESE SUPPORTS:  
\_\_\_\_\_

