



Consent Form

This form is to be completed by all clients. The consent provided in this form is valid until withdrawn and may be withdrawn at any time.

CONSENT TO COLLECT, USE, STORE & RELEASE PERSONAL INFORMATION

The MND and Me Foundation respects customer privacy and complies with the Australian Privacy Principles under the Privacy Act 1988. Our privacy policy is available on our website at: http://www.mndandme.com.au

The personal information requested is being collected for the purpose of:

- Providing care and services to you by the MND and Me Foundation
- Disclosure to others involved in your healthcare. This may include information shared as part of a referral to other service providers and allied health care practitioners
- Reporting, research and quality assurance activities. Should information that will identify you be required, you will be informed and given the opportunity to "opt out" of any involvement

Your signature on this document is your consent for the MND and Me Foundation to obtain, use, store, share and release your information in accordance with our policy & procedures and the Privacy Act 1988. You can decline to have your health information used in some of the ways outlined above noting that this may impact on the scope of services we can provide.

If you do not want your personal information shared please indicate in the exclusions section.

Privacy – you will be asked to complete this Consent Form before you commence services with the MND and Me Foundation. In addition, at various stages of your relationship with MND and Me, or for a specific activity, you may be asked to reaffirm your consent for MND and Me to collect, use, store & release personal information. Our Privacy policy is on our website.

Conf ict of Interest – MND and Me Foundation believes in a customer's right to choose their own services and service delivery provider and we will advise you if there may be a conflict of interest about different services offered to customers by MND and Me.

Complaints – MND and Me Foundation takes feedback seriously and will investigate and manage complaints fairly and expeditiously. Customers may make a complaint in any form (e.g. written, email, verbal, from the website or via an authorised advocate). In certain circumstances complaints may need to be escalated to external authorities (e.g. if criminal action is alleged) and will be done so according to our Complaints procedure.

Incident reporting - incidents and complaints may be reported to external authorities depending on the nature and severity. In particular, Critical and Major Incidents may need to be reported to DSQ, NDIA Quality & Safeguards Commission, Police, or various relevant government departments according to regulation.



Consent Form

Please speak with the MND and Me Foundation staff member providing services to you about the details of the personal information required and how it is used before signing this consent form.

	/	/
Print full name of client	Date of b	
Address of client		
Please tick: I give consent for the MND and Me Flease personal information about me (the services by MND and Me Foundation and I request the following exclusion to n	above-named client) for t associated service provion ny consent:	he provision of care an ders
SIGNED:		•••••
Signature of customer/substitute decision	maker (if applicable)	/ 20 Date
IF CONSENTING & SIGNING ON BEHAL	F OF CUSTOMER:	
Full name:		
Address:		
WITNESSED:		
Signature	Date	/ / 20
Name & relationship/position		