

**Milestones Clinic
Child and Family Psychological Services**



Rooms are located at
Milestones
7/37 Cedric St
Stirling, 6021
Ph: (08) 9207 1990
Fax: (08) 9207 1991
reception@milestonesclinic.com.au

**IMPORTANT INFORMATION
PLEASE READ
and COMPLETE INFORMATION WHERE REQUIRED**

FEE SCHEDULE:

\$210.00	-	for each hour of consultation/assessment.
\$420.00	-	standard assessment – 100 mins
\$552.00	-	long report
\$420.00	-	short report
\$599.00	-	report preparation (Autism)
\$299.00	-	summary report
\$330.00	-	case conference (school visit)

*NB: most reports that are part of a comprehensive psychometric assessment are “long”.

Payment is required at each session.

Written reports will be released **after** payment of fee.

Usual charges for a psychometric assessment:

4 hours assessment	\$840.00
1 hour feedback	\$210.00 (if required)
Long Report	<u>\$552.00</u>
TOTAL:	\$1,602.00

Appointments that are cancelled without 48 business hours notification will incur a cancellation fee of \$210

PLEASE NOTE:

Private health fund rebates may apply although it must be emphasised there is a significant gap between the fee charged and the health fund rebate in many instances. **Please check with your own health fund to establish whether a rebate applies.**

Medicare rebates do not apply to psychometric assessments.

Behavioural Issues:

For behavioural issues including anxiety, oppositional behaviour, self esteem and/or parenting problems, it may be helpful to ask your General Practitioner to review your child and make a referral to the relevant clinician under the Medicare Better Access Scheme initiative (item no. 80110 for psychologists). This will allow you to receive a rebate of approx. \$85 for each \$210 consultation. Alternatively private health rebates do apply.

NDIS

Our fees are fully claimable by NDIS if you are self-funded.

Any appointments that are cancelled without 48 business hours notification will incur a cancellation fee of \$210.

PLEASE NOTE all charges/fees are **reviewed** each year.

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What happens to information collected at Milestones Clinic?

Psychologists are required by law and the Australian Psychological Society (APS) to retain client documentation for at least seven years after last contact. In the case of children, information must be stored until they reach 25 years of age (APS Code of Ethics). All documentation is held in secure storage, and will only be released to you except in the following circumstances:

- If there is a legal obligation to do so,
- Failure to disclose the information would put you, your child or another person at serious risk, or
- Your prior approval has been obtained to a) provide a written report to another professional or agency, or b) discuss the material with another person (e.g., staff at your child's school).

In accordance with the principles laid down in privacy legislation and by the APS, you may access the material recorded in your child's file upon request, subject to the exceptions in National Privacy Principle 6. There will be no charge made for requesting this information, but there may be fees levied to cover the costs of finding and copying the information.

Please note: Once a child seen by a psychologist at Milestones Clinic turns 18 years of age he/she is then identified by law as the 'client'. After this age they are entitled to access their records.

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Referral for assessment/consultation

Child's Name: _____

Date of Birth: _____

Home Address: _____

Postcode: _____

Caregiver 1: Name: _____

Address: _____

Caregiver 2: Name: _____

Address: as above – or: _____

Home Phone: _____ Work/Mobile _____

E-mail: _____

Person Responsible For Account (Full Name): _____

Address (If Different From Above): _____

School: _____

School Address: _____

Year Level: _____

Person Referring: _____

Telephone: _____

Date Of Referral: _____

**PLEASE SIGN HERE TO CONFIRM THAT YOU UNDERSTAND THE FEES
PAYABLE AT THIS PRACTICE, PARTICULARLY THAT A WRITTEN REPORT
IS BILLED SEPARATELY TO CONSULTATIONS:**

SIGNED: _____ DATED: _____

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Please Complete All Sections Below

Brief Statement of Referral Problem:

Details of Actions Taken to Date:

Details of any agency with whom child has been/ is involved:

(e.g. PMH, University Clinic, State Child Development Centre, Child and Adolescent Clinic, Disability Services)

Details of involvement with any other related professional – currently and in the past (e.g. Speech Pathologist, Psychologist, Occupational Therapist).

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Previous Standardised Assessment (if any):
(e.g. Reading, Spelling, Maths, Intelligence, Speech and Language)

Date	Test (Name)	Results

**** If possible, please attach copies of any reports completed by other health professionals.***

Desired outcomes for this referral and any further comments:

Please return all completed forms before the first appointment in an envelope marked (PLEASE DO NOT SEND QUESTIONNAIRE FORMS BACK TO US VIA “REGISTERED MAIL” – ORDINARY MAIL IS PREFERRED):

Confidential Attention:
Dr Robin Harvey, Dr Jade Bogdanovs, Luisa Rossi, Tara Hawkins or Jodie Bell
(Child and Family Psychology Services)
Milestones Clinic
7/37 Cedric Street
STIRLING WA 6021

Milestones Clinic
Child and Family Psychology Services
Background Questionnaire

Private and Strictly Confidential

Child's Name _____
(First Name) (Surname)

BACKGROUND INFORMATION

Pregnancy, Birth and Infancy

At what age did your child walk? _____ months

At what age did your child begin to talk? _____ months

Were there any difficulties concerning the birth of your child, in terms of the following:

During Pregnancy? _____

During delivery? _____

Following delivery? _____

Was your child premature, full-term or overdue? _____

If premature, how many weeks? _____

What was your child's weight at birth? _____

Child's medical background

Does your child currently take any prescribed medication on a regular basis (e.g. daily, weekly or monthly)? YES/NO

If YES, please provide details:

Has your child had any serious illnesses or operations? YES/NO

If YES, please provide details below, including age when these occurred:

Does your child have, or has s/he ever had, any difficulty with vision (including visual processing)? YES/NO

If YES, please provide details, including age of onset and any assessment findings:

Does your child have, or has s/he ever had, any difficulty with hearing (including auditory processing)? YES/NO

If YES, please provide details, including the age at which any difficulties were first noticed and any assessment findings:

Schooling

Schools (including current one) attended since Kindergarten?

School:

Dates Attended:

_____	_____
_____	_____
_____	_____
_____	_____

Has your child ever repeated a year at Preschool or School or High school? YES/NO

If YES, please state which school year(s) _____

Has your child missed a large amount of school for any reason (e.g. due to travel or illness)? YES/NO

If YES, what duration of time _____

Has your child consistently experienced learning difficulties in the school environment?

YES/NO

If YES, please provide some further detail:

Has your child consistently experienced social difficulties in the school environment?

YES/NO

If YES, please provide some further detail:

Has your child experienced any difficulties outside the school environment?

YES/NO

If YES, please provide some further detail:

Family Background

Please list other children in the family

Name

Age

Please complete the following questions in relation to the caregiver(s) with whom the child lives:

Occupation caregiver(s)

Caregiver

Occupation

<hr/>	<hr/>
<hr/>	<hr/>

Language(s) spoken at home

Has any member of your child's family experienced any psychological difficulties?

YES/NO

If YES, please provide a brief outline of the difficulties experienced:

Has any member of your child's family experienced any educational/learning difficulties?

YES/NO

If YES, please provide a brief outline of the difficulties experienced:

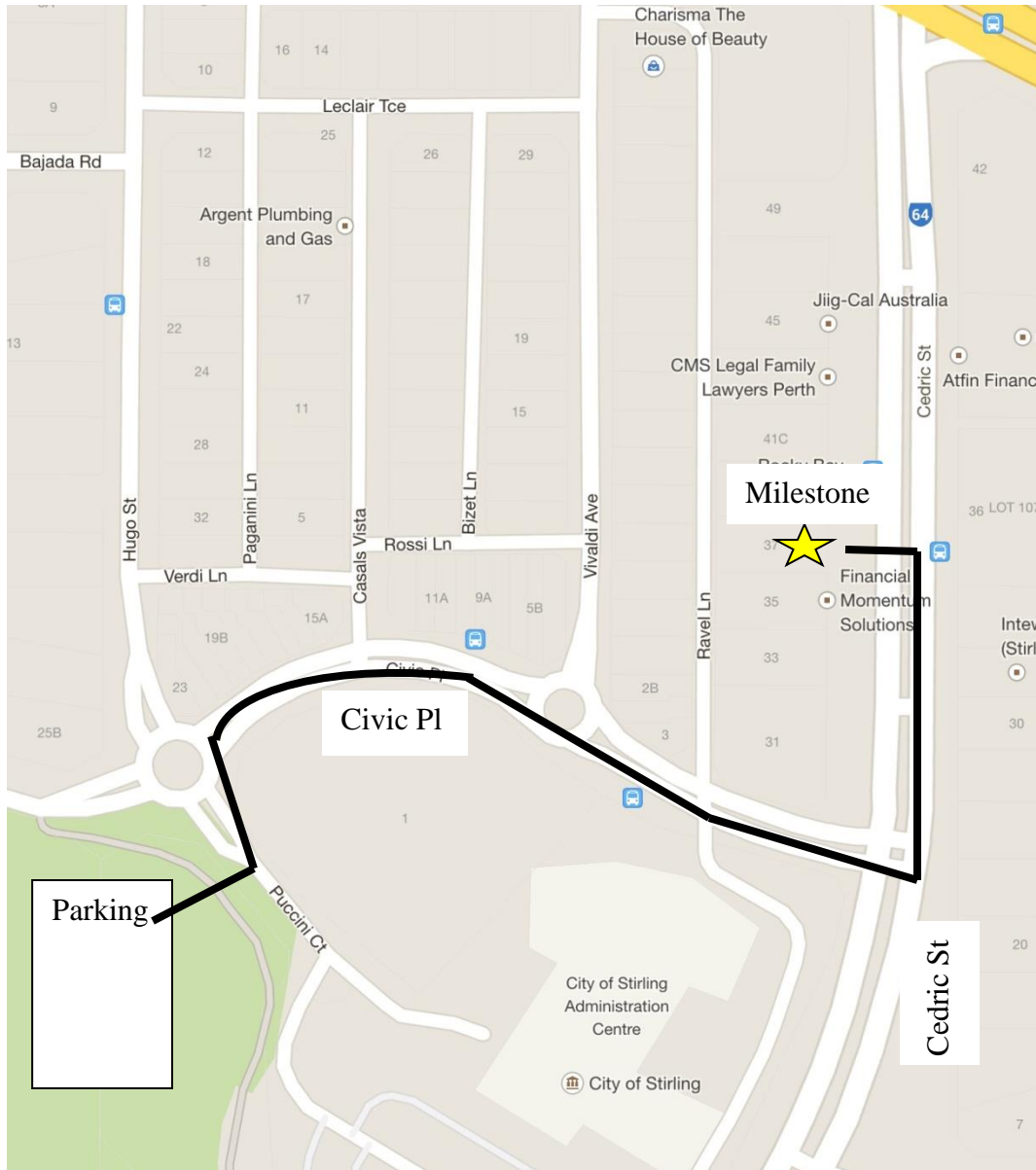
Is there anything else you think we may need to know about your child? YES/NO

If YES, please provide details:

This questionnaire was completed by

THANK YOU FOR COMPLETING THIS QUESTIONNAIRE.

Parking at Milestones



It can be difficult to find a ticket parking spot in front of Milestones. There is alternate parking available a few minutes walk, just off Civic Place behind the City of Stirling. This parking is free and there is no time limit.