



## **CANCELLATION POLICY**

At Peach Speech Pathology, we are committed to providing a quality service to our clients. As part of that commitment, we ask that appointments be attended on a regular basis. Regular attendance is essential to client progress.

Please let us know as soon as possible if it is necessary to cancel or re-schedule your session. Our therapists maintain full schedules, so your advance notice enables us to offer the available appointment time to another client who has been on the waiting list for some time. Cancellations in advance may be made by email or phone, but please be sure that you receive confirmation of the cancellation from your therapist.

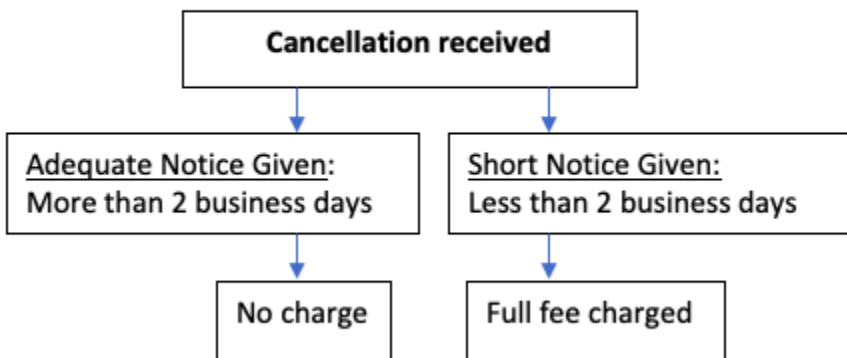
If you or your child are unwell or an emergency occurs, and you are not able to attend the appointment, please call us and let us know as soon as possible so we can make arrangements to accommodate your situation. If your session is outside the clinic (e.g. at school, work or home) and you will be absent, please notify the therapist as soon as possible (and at least the day before as per minimum requirement).

Your appointment is a contract for exclusive use of the therapist's time during your designated appointment time. Cancellations directly affect utilisation of the therapist's time, so non-attendance without notice and late cancellation fees cover the therapist's reserved time. "No shows" and late cancellations – particularly if they happen more than once – can interfere with our trust in each other and, over time, can affect the client's progress and quality of service. We take pride in our work and do not want this to happen. We will reschedule the appointment whenever possible. If an appointment is unable to be rescheduled within the same week, a cancellation fee will apply.

### **NDIS CLIENTS**

The National Disability Insurance Agency provides clear requirements for NDIS clients regarding cancellations. Peach Speech Pathology adheres to these requirements. NDIS clients are required to provide 2 business days notice for cancellations. With this notice, no cancellation fees are charged. If an NDIS client provides less than 2 business days notice, the full fee will be charged for the cancellation.

### NDIS Clients – As per NDIS requirements



### PRIVATE CLIENTS

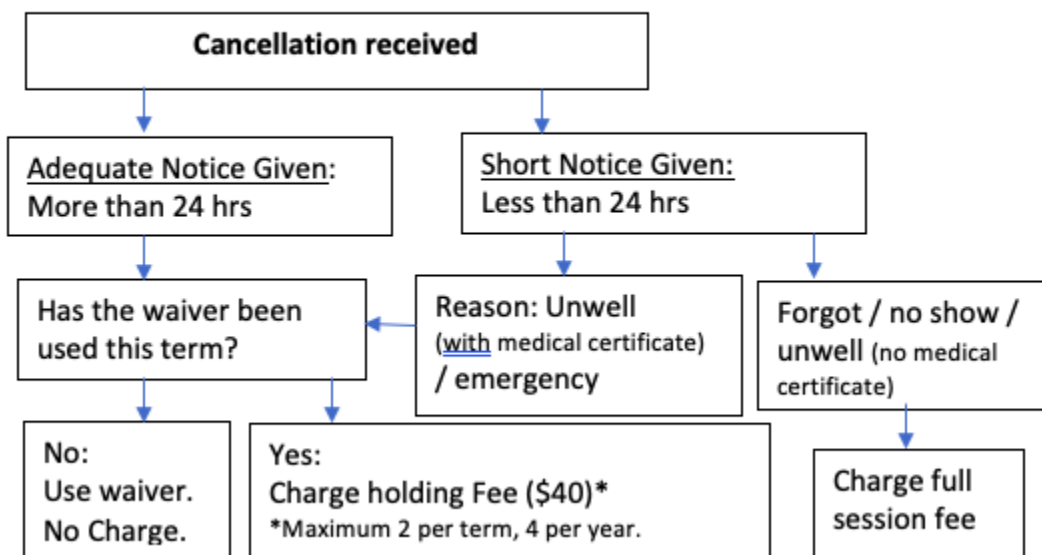
**Peach Speech Pathology has a 24-hour late notice policy for private clients.**

We understand that illness and emergencies can occur with little notice, so as a result we have introduced a ‘cancellation waiver’. **Clients will receive one ‘cancellation waiver’ per school quarter (school term), which will mean there will be no charge for their cancellation.** This waiver can only be used once during the quarter in lieu of paying a cancellation fee.

**If you fail to attend, cancel or seek to reschedule an appointment with less than 24 hours’ notice, full session fees will be charged** at the therapy rate for that time. Travel and any other related costs will also be charged if incurred as part of attempting to deliver our service. It is the clinician’s discretion to offer a make-up appointment/time. If you or your child attends the clinic and are visibly unwell, you will be asked to leave the clinic as per our COVID-19 conditions of entry. You will also be charged the full session fee for that session.

Just like most swimming lessons or daycares, we require payment to hold your ongoing session time when you cannot attend. To ensure you or your child have a consistent appointment day and time scheduled with your therapist, **appointments cancelled with more than 24 hours notice will be charged a \$40 holding fee per session, or you may use your ‘cancellation waiver’ if available.** Simple alternative services, such as providing home practice activities or a short support phone call to caregivers can be provided if appropriate when clients incur a holding fee. Following 2 holding fees in a quarter, or 4 in a year, full fees will be charged for cancellations.

**Private Clients**



If we need to cancel an appointment for any reason, we may do so at any time before the appointment is scheduled to begin. We do not expect this to happen, except in exceptional circumstances, and we will refund any fees you have paid us for the appointment, or offer you a choice of alternative dates for the appointment.

If you have any questions regarding this policy, please speak to your Therapist or contact the clinic (contact details below).

I have read and understood this policy.

**Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_