



Terms & Conditions – Speech Language & Literacy Therapy

1. **Fees** – will be agreed prior to the assessment or therapy session. A deposit may be required.
2. **Payment** - by cash, cheque or bank transfer before, or at time of, session. Missed payments will result in services being suspended until the balance is cleared. Invoices / receipts can be provided.
3. **Cancellation** – appointments cancelled up to 24 hours beforehand will not be charged. For appointments cancelled with less than 24 hours’ notice the full fee may be charged. Unforeseen circumstances preventing attendance will be taken in to account. If the therapist is unable to attend an appointment, as much notice as possible will be given and the appointment rescheduled.
4. **Travel** – travel is charged at 45 pence per mile for each mile of the return journey. Google Maps will be used to calculate mileage. Deviations incurred due to road works or unforeseen circumstances may be charged in addition to the quoted mileage. For journeys longer than 15 minutes’ duration a cost for travel time is also incurred at £10 per 15 minutes.
5. **Consent** – by attending sessions with the therapist the parent is consenting to the assessment and treatment of their child. You will be asked to sign to give additional consent for the sharing of information with other professionals who work with your child.
6. **Statutory Services** - many clients are eligible for services provided by the local NHS Trust or Local Authority. Entitlement to access these services should not be affected by a decision to also access privately-funded services.

If a client chooses to use more than one service, it is in that client’s best interest that both services involved collaborate freely. If the client wishes a confidential second opinion and does not there to be liaison, this will be respected and documented in the client’s notes.

7. **Termination of service** - it is within the rights of the client to terminate assessment or intervention with 24 hours’ notice. KCT may terminate or suspend intervention at any time and the reasons will be explained to the client.

- I understand and agree to the above Kernow Communication Therapy (KCT) terms & conditions:

Signed: _____ Name: _____ Date: _____

Child’s Name: _____ Date of Birth: _____

- I have read and agree to the Kernow Communication Therapy (KCT) Privacy Policy:

Signed: _____ Date: _____

Consent

- I give consent for my child to receive assessment and therapy from KCT

I give consent for KCT to share information about my child with other professionals, health and education staff, as appropriate in order to provide the most effective treatment.

Any exceptions: _____

Signed: _____ Name: _____ Date: _____