

Consent to release information form

Client name		Date of consent	
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Lifestyle Solutions and Possability have developed a consent procedure to protect your privacy. We are committed to acting in line with the National Disability Insurance Scheme Act 2013 and the Australian Privacy Principles, which are in the Privacy Act 1988 and describe how we are required by law to collect, hold, use and disclose your personal information.

What is personal information?

Personal information is information about you. It will range from your name and contact details to sensitive information, such as information about your NDIS plan and assessments, as well as supporting documents about your health, safety and wellbeing, including medical records.

Consent to release information

The Centre for Positive Behaviour Support would like to discuss with you transitioning your services to them. They need the following information so they can speak to you about your supports.

- Your name
- Your date of birth
- Your NDIS plan number
- Your contact details – phone, email and address
- A copy of your service agreement – Working Together Agreement and Service Schedule
- A copy of your support plans.

Consent

By signing this form, I give consent for Lifestyle Solutions/Possability to release my personal information so that the Centre for Positive Behaviour Support can discuss services with me.

I have read and understand the nature of this release and understand that my consent will remain effective for four weeks or until otherwise notified.

Signature (client)		Date	
Name of supportive decision maker		Relationship	
Signature		Date	