



## Employee Assistance Program (EAP)

Alegna Solutions provides an Employee Assistance Programme (EAP) to help both employers and their staff manage personal and work related issues that can affect the workplace. This is a free and confidential counselling service provided by registered psychologists offered by employers to their employees to support their wellbeing in the workplace and their personal lives. This makes for happier and healthier employees who are more productive, focused and resilient.

### EMPLOYER APPLICATION

To register your organisation with Alegna Solutions as an EAP provider, please complete the following details:

**Company (Employer) Name:** \_\_\_\_\_

**ABN:** \_\_\_\_\_

**Company Address:** \_\_\_\_\_

**Postal Address:** \_\_\_\_\_

#### Contact Person

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

**Phone:** (\_\_\_\_) \_\_\_\_\_ **Mobile:** \_\_\_\_\_

**Fax:** (\_\_\_\_) \_\_\_\_\_

**eMail:** \_\_\_\_\_

*(For receipt of invoices and case management communication)*

**EAP is extended to employee's immediate family members:** yes / no

*(For Family, Marital & Relationship Issues to be covered yes must be circled)*

**Manager or Supervisor referral required:** yes / no

*(If yes is circled Alegna Solutions must receive a referral by fax or eMail for each employee before an initial consultation can be booked. Otherwise employees can request consultations using their own initiative without prior employer approval)*

I/we acknowledge that Alegna Solutions will invoice our organisation for each consultation completed with 7 day payment terms (direct deposit). Direct Debit of bank account, Visa or MasterCard is also available upon request. Consulting fees are charged in accordance within recommendations set by the Australian Psychological Society (APS). Appointments that are cancelled with short notice or not attended will also be invoiced for – we recommend you recoup these costs if applicable from your employee. At the conclusion of each initial consultation the applicable treating psychologist will notify the above listed person via eMail of the number of required sessions (including their frequency) according to the treatment plan developed for the employee.

#### Authorised Person for Company (Employer)

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

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