



INTAKE PACKAGE iMindU B.V. from 01-01-2022

ADULTS

The intake package for treatment at iMindU B.V. BV contains the following parts to complete (numbers 1 to 5), to sign (numbers 2 to 4) and to return if you want to register with us:

1. *Registration form*
2. *Declaration of Consent*
3. *Treatment agreement*
4. *Terms and Conditions and Payment Agreement*
5. *Developmental history*
6. *Letter of referral GP, SGGZ*

You can find additional information about the treatment at <https://www.imindu.nl>

7. *Compliments and complaints procedure*
8. *Privacy statement iMindU B.V. BV*
9. *House Rules and Covid Protocol iMindU B.V.*
10. *Leaflet iMindU B.V.*
11. *Care Performance Model folder (Folder 'Zorgprestatie-model')*
12. *Patient Satisfaction Form*
13. *Privacy Declaration*
14. *Declaration of objection*

Please fill out all requested parts as completely and accurately as possible according to truth. This helps us in our analysis of what's going on and how we can best help you, speeds up help and increases efficiency.

As soon as we have received the fully completed intake package from you and a letter from the general practitioner via Zorgdomein, we can plan an intake date with you. If you do not want to be treated by a Dutch health insurer in accordance with the ZPM but want to pay yourself or through your international insurer, you must also pay us a deposit of € 2.000 prior to your treatment, which you will get back at the end of your treatment once all invoices have been paid. If we can claim directly from your international health insurer and you have obtained a guarantee from them, we may consider waiving the deposit. However, we reserve the right to require the deposit. The rates for adults who pay through an international insurer and/or themselves are according to the NZa rates of the ZPM as of 2022.

You hereby declare that you have read and understood all information and that you agree to entering into a treatment and payment agreement and general terms and conditions such as

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AGB code GGZ-instelling 22221354

explained below. You hereby specify what you give permission for when it comes to requesting information, providing information and making sound recordings or audio-visual recordings in the context of data processing, supervision/intervision and education. If a legal representative is involved in your health and well-being, they will co-declare and sign what you are asked to declare and sign.

During the intake, diagnostic and advisory process, we also submit the following forms to you and use the hereafter measuring instruments as standard:

1. *HONOS+ (typing care intensity)*
2. *Cultural interview*
3. *ACE Score*
4. *Balance model*
5. *Child and informal care check*
6. *Developmental Profile Questionnaire*
7. *Routine Outcome Monitoring Questionnaires*
8. *Adult Attachment Interview*
9. *Hetero-anamnesis(s) next of kin*

If necessary, we also take:

10. *a parenting interview about each of your children*
11. *a forensic interview about your relationship*
12. *a relationship questionnaire*
13. *other specific interviews and questionnaires regarding symptoms and personality*
14. *specific psychological and intelligence tests and observations e.g. a family diagnostic assessment.*

If necessary, fill out:

15. *a safety plan*

You fill out the *informed consent* after the advisory consultation and we make a *treatment plan* together. This treatment plan is regularly evaluated together with you. If necessary, we also draw up a safety plan.

In the course of the diagnostic process, we also prepare a *psychiatric report* of all data obtained, which during treatment is being expanded with data from the therapy provided and, if necessary, additional diagnostics over time.

YOUTH

The intake package for treatment for children and young people (up to 18 years) at iMindU B.V. contains the following parts to complete (numbers 1 to 5), to sign (numbers 2 to 4) if desired and to return to us if your child and you as parents or legal representatives want to register with us:

1. *Registration form*
2. *Declaration of Consent*
3. *Treatment agreement*
4. *Terms and Conditions and Payment Agreement*
5. *Developmental history*
6. *Letter of referral GP, SGGZ*

You can find additional information about the treatment at <https://www.imindu.nl>

7. *Compliments and complaints procedure*
8. *Privacy statement iMindU B.V.*
9. *House Rules and Covid Protocol iMindU B.V.*
10. *Leaflet iMindU B.V.*
11. *Care Performance Model folder (Folder 'Zorgprestatie-model')*
12. *Patient Satisfaction Form*
13. *Privacy Declaration*
14. *Declaration of objection*

Please fill out all requested parts as completely and accurately as possible according to truth. This helps us in our analysis of what's going on and how we can best help you, speeds up help and increases efficiency.

As soon as we have received the fully completed intake package back from you and a letter from the GP or JGT via Zorgdomein, we can plan a date for intake with your child and you as parents/carers. Depending on the age of the child, we will first speak with you as parents/guardians (child younger than 12 years), or first the teenager himself together with the parents/guardians (child 12-18 years old), or the adolescent alone (if desired at the 16-18 year olds).

If your child does not wish to receive reimbursed treatment through a Dutch municipality (for example due to privacy) and/or if you want to pay yourself or through your international insurer, you must also pay us a deposit of € 2.000, -- prior to your treatment which you will receive back at the end of your treatment if all invoices have been paid. If we can claim directly from your international health insurer and you have obtained a guarantee from them, we may consider waiving the deposit. However, we reserve the right to require the

deposit for business reasons. The rates for children and young people who pay through an international insurer and/or pay themselves are determined per discipline according to a list of rates that we adjust every year or in case of changing circumstances.

You hereby declare that you have read and understood all information and that you agree to entering into a treatment and payment agreement and the general terms and conditions as set out below.

You hereby specify what you give permission for when it comes to requesting information, providing information and making sound recordings or audio-visual recordings in the context of data processing, supervision/intervision and education.

During the intake-, diagnostic- and advisory process, we also present your child and/or you with the following forms and interviews and use the aforementioned measuring instruments as standard:

1. *Cultural interview with the young person and you*
2. *ACE Score*
3. *Balance model*
4. *Routine Outcome Monitoring Questionnaires*
5. *Hetero-anamnesis(s) parents/relatives*
6. *Family Diagnostic Assessment*

If necessary, we also take:

7. *Adult Attachment Interview or Child Attachment Interview for the child/teenager/adolescent*
8. *observation parent-child interaction*
9. *observation of child's mental representations towards parents*
10. *a parenting interview with both parents*
11. *a forensic interview with your child and you*
12. *other specific interviews and questionnaires regarding symptoms and personality*
13. *specific psychological and intelligence tests and observations*

If necessary, fill out:

14. *a safety plan*

You fill out the *informed consent* after the advisory consultation and we make a treatment plan together. This treatment plan is regularly evaluated together with you and your child. If necessary, we also draw up a safety plan.

In the course of the diagnostic process, we also prepare a child *psychiatric report* of all data obtained, which during treatment is expanded with data from the therapy provided and, if necessary, additional diagnostics over time.



TREATMENT AGREEMENT

These payment terms, including the terms, conditions, policy terms, policies, guidelines and instructions contained therein ("Payment Terms") and the General Terms and Conditions related to your access to our services ("Terms and Conditions") constitute a legal contract between iMindU B.V., Chamber of Commerce 67312969, with its registered office at Rapenburg 34A, 2311 EX LEIDEN, The Netherlands, and you, the patient and/or his/her legal representatives who have entered into a treatment agreement.

By accepting or otherwise agreeing to our Terms and Conditions of Payment orally and/or in writing and/or giving informed consent at a time after the consultation, you acknowledge that you have read and understood iMindU B.V.'s Terms and Conditions of Payment, and that you agree that you are bound by these General and Payment Conditions. The terms defined in the iMindU B.V. Payment Terms have the same meaning as the terms used in the iMindU B.V. Terms and Conditions, unless otherwise specified here.

Patient Name:

Date of Birth:

Phone number:

E-mail address:

hereinafter referred to as "patient" and his or her legal representatives

and

iMindU B.V., practice owner Ms. dr. M.J. van Hoof (child and youth) psychiatrist, psychotrauma therapist, orthopedagogue, hereinafter referred to as "iMindU B.V.", agree on the contents of the "Treatment Agreement" document. This agreement is subject to iMindU B.V.'s Terms and Conditions of Payment.

These General and Payment Conditions of iMindU B.V. have been provided to you on paper, digitally or you can download them from the iMindU B.V. website, see

<https://www.imindu.nl>.

PAYMENT TERMS, REMUNERATION AND INVOICES AS OF 01-01-2022

Terms of payment:

ADULTS

For 2022, the multidisciplinary mental health care institution iMindU B.V. has no contracts with health insurers under the still existing ambiguities of the Healthcare Performance Model (ZPM) and the National Quality Charter (LKS) and their implementation and therefore



provides uninsured care, an uninsured product according to the Dutch Healthcare Authority (NZa). This uninsured product, diagnostics and/or treatment/advice/consultation, is charged directly to the patient according to the rates of the NZa. You will receive a monthly invoice from us for time spent on you, which you will pay for yourself within 14 days. To obtain reimbursement for this invoice from your health insurer, you must submit the invoice to your health insurer as soon as possible after receipt. iMindU B.V. reserves the right to request an advance at any time and will settle this with the invoice itself.

The multidisciplinary mental health care institution iMindU B.V. uses the NZA rate for GGZ for adults, which currently (2022) follows the reimbursement rules of the Care Performance Model (<https://lvvp.info/voor-clienten/zorgprestatie-model-wat-verandert-voor-patienten/>). Healthcare products are exempt from VAT. Statutory personal contributions to therapy can be billed directly to the patient.

Please note: iMindU B.V. will charge you the full rate corresponding to the reserved time also if you do not cancel (timely) or do not show up (on time) for your appointment, so-called '**no show**'. This is a legal requirement. The same rate applies as you would have paid if you had appeared. After all, we have reserved that time for you and cannot see anyone else instead of you. If you have a meeting together with relatives, for example a family therapy meeting, and someone from the family is suddenly unable to come, it is up to the practitioners whether the planned appointment can take place or whether this is therapeutically contraindicated. The same applies to appointments where it appears that the assigned homework has not been completed. Consultations with relatives (hetero-anamnesis, interviews, family diagnostic assessment, family therapy, telephone, written or digital contact) are also charged. In addition, the need to organize crisis interventions and hospital admissions is charged, including external consultations with professionals and authorities and the need to write letters or psychiatric reports in this context.

You currently have a compulsory deductible of € 385 per year (unless you have agreed a higher deductible with your health insurer). You should take into account that you will have to pay this extra amount if you have not yet incurred any other medical costs this year, as a result of which this deductible has already been drawn on.

Depending on which health insurer it concerns and whether you have a refund policy ('restitutiepolis') or a policy in kind ('naturapolis' or 'combinatiepolis'), a percentage of between 55%-100% of the costs for your treatment at iMindU B.V. will be reimbursed by the health insurer. A refund policy guarantees a higher payout percentage (80-100%) than a policy in kind (55-80%) and is therefore recommended. It is your own responsibility to ask your health insurer in advance whether the treatment at iMindU B.V. is reimbursed and to what extent. iMindU B.V. always charges the NZa rate regardless of the type of policy you have.



Uninsured care for adults includes grief therapy, relationship therapy (and with some insurers possibly also family therapy), diagnostics and therapy such as Raymedy, neurofeedback, rTMS, QEEG, genetic or lab research without strict medical indication, or sometimes dietary advice. For this we use a rate that matches the payment category of the healthcare professionals involved in the therapy concerned. You can request a cost estimate from the relevant professional. In the case of treatment by two healthcare professionals, for example with family therapy, the rate of both healthcare professionals involved applies.

We can also prepare a cost estimate for coaching, mediation, consultation, second opinion and expert witness or diagnostic reports with a rate depending on the payment category of the healthcare professionals. For all the above uninsured care, a high VAT rate (21% at the moment) is charged, because it does not concern care products.

Please note: under point 5 of the general terms and conditions it is stated that even if you do not cancel in time or do not appear (on time), iMindU B.V. will charge you the full rate corresponding to the reserved time.

YOUTH

For 2022, the multidisciplinary mental health care institution iMindU B.V. has a limited contract with the municipality of Holland Rijnland (referral via JGT) and also opts for a contract with other municipalities for the provision of reimbursed specialist youth mental health care. Ask our secretariat whether we have concluded a contract with your municipality and what the conditions for its use are.

If your child does not qualify for reimbursed care on a municipal contract basis, you can contact iMindU B.V. as a self-payer. The rates for uncontracted youth care are free. We then explicitly advise you (we will mention this three times from the moment you contact us) to apply for a Personal Budget (PGB) with reference to Article 8 of the Youth Act, whereby the municipality provides youth mental health care for young people, and you have a free choice of doctor. In case you pay yourself, regardless of whether you request a PGB or not, we ask you for a deposit of € 2,000 in advance into the account of iMindU B.V.

NL17INGB0008885787 in Leiden, stating 'deposit'. You will get a receipt from us for this. You will receive this 'deposit' back at the end of the treatment if all invoices have been paid. Consultations, diagnostics and therapy sessions must be prepaid if planned. The monthly additional invoices must be paid within a week or, if the next visit to the practice is earlier, paid on site prior to the consultation.

For self-payers, iMindU B.V. charges an hourly rate for consultations with young people that differs per discipline: child and adolescent psychiatrist € 185/hour, psychiatrist € 175/hour, clinical psychologist € 150/hour, family therapist € 140/hour, psychotherapist € 125/hour, psychologist NIP/GZ psychologist/orthopedagoge-generalist € 115/hour,



postmaster psychologist/orthopedagogue € 105/hour without VAT for both direct and indirect spent time; A PGB usually covers the majority of these costs. Ask your JGT or the municipality's PGB team. We will make a cost estimate for you if you want to apply for a PGB or if you indicate that your international health insurer, embassy, or consulate will pay for the treatment at iMindU B.V.. As a parent, you sign the cost estimate for approval, including any additional costs. The cost estimate is a rough estimate of the costs to be incurred. We invoice the actual costs incurred, which may therefore differ from the original cost estimate. We cannot provide a cost estimate if the safety of any family member is at stake.

This has to do with the fact that third parties, namely security chain partners and legal advice, have to be called in in that case and the pace at which matters are arranged in terms of security and which measures, legal advice and time investment on the part of iMindU B.V. are needed are difficult to estimate and can vary enormously. You are responsible for any costs to be incurred for your safety and that of the practice and its employees. In all cases you remain responsible for payment of costs incurred by iMindU B.V., even if you are not reimbursed or only partially reimbursed by your international health insurer, embassy, consulate or municipality.

Other participating disciplines within iMindU B.V. and with which iMindU B.V. collaborates, such as the pediatrician, pediatric dietician, psychomotor therapist, pediatric physiotherapist, creative therapist, speech therapist and sometimes an additional family therapist, charge their own rate, see their own websites. Somatic care and speech therapy can sometimes be paid for from the health insurance, check with your health insurer.

According to the Youth Act, in particular Article 8, you as a parent can decide for yourself from whom you purchase help, provided you are competent in a general sense, which is the majority of the parents. You can try to apply for this so-called Personal Budget (PGB) in your municipality, but possible granting can take 1.5-3 months and is not guaranteed.

Unfortunately, municipalities do not reimburse care afterwards through a PGB. It is best to ask whether your PGB may start on the date of application. There is a free choice of doctors in the Netherlands, but each municipality has its own rules for granting a PGB. Be warned that your privacy and medical confidentiality are often at stake when applying for a PGB, because the municipality often demands openness regarding medical content in such a meeting in order to properly assess the PGB application, they say. Substantiation is often requested from the coordinating practitioner involved, in which case details of, among other things, diagnosis, treatment plan, treatment goals, and prognosis must be submitted. The costs of this will be charged to you, the municipality doesn't pay them.

An iMindU B.V. bill for self-paying youth can include different types of time spent, both direct and indirect. This can be direct patient-related time in the form of face-to-face contact, contact via calling, app-texting, sms-texting, emailing, videocalling or patient portal/digital, or indirect time such as spent on administration, preparation and elaboration of sessions, whether or not via reports, video recordings, supervision, consultation with third parties, writing reports, letters, statements, prescriptions, searching and reading literature,



and travel time if necessary, for example when an appointment takes place at a location outside the practice such as school. We aim to send invoices monthly.

If it proves necessary to realize a clinical admission because the diagnosis requires this or the treatment on an outpatient basis per acute or sub-acute is insufficiently helpful according to our professional judgment, the costs for this, including the organization thereof (including consultation with clinics about location, taxi transport, waiting time, extensive (child) psychiatric report, letters, legal assistance, etc.) recovered from the patient or his/her legal representatives, even if compensation from the municipality such as a PGB has not yet been completed. Parents are responsible for obtaining a contribution towards the costs from the municipality or other sources.

Divorced parents are jointly responsible for payment of costs and invoices from iMindU B.V. on behalf of their child or young adult covered by their health insurance, even if either parent at any time believes that he or she cannot pay his or her part of the invoice. This means that either parent pays the entire invoice amount to iMindU B.V. within one week of invoicing. It is assumed that this is the notifying parent, unless otherwise agreed. If parents are divorced, they must determine in advance, indicate and record who pays iMindU B.V. for services rendered with regard to the child and the family/parents. If divorced, both parents must give permission for diagnosis and treatment, unless the court has ruled otherwise. If you cannot reach an agreement, first turn to an intermediary who, if necessary, opens and/or manages a third-party account. iMindU B.V. only sends one invoice regarding child(ren) to parents, even if parents are divorced. It is not possible to split the invoice per parent. Should the above arrangement nevertheless lead to friction between the parents, the treatment of the child, adolescent or young adult will be discontinued until a workable solution has been found by the parents, unless the interests of the child oppose stopping the treatment. As a result of good parenting, parents are themselves responsible for the progress of the therapy in this regard and for finding a quick, adequate solution for payment problems. A payment arrangement can be an option in consultation. A mediator also works within iMindU B.V., who is also a complaints officer, who can assist parents in arriving at a workable solution where appropriate.

iMindU B.V. sometimes participates in scientific research. If you or your child are eligible for participation in scientific research, your therapist will first give you an explanation without obligation and you will receive forms with information about the research in question, so that you and/or your child can decide for yourself whether you want to participate. Not participating has no consequences for the treatment at iMindU B.V..



General:

iMindU B.V. can transfer the debtor administration and the collection of the receivables to a third party.

In the event of payment arrears, iMindU B.V. is entitled to suspend further treatment, unless the amount of the payment arrears and/or the nature of the treatment or the safety and/or duty of care dictate otherwise. It is of course not in the interest of you or your child to terminate an ongoing treatment for financial reasons, so you should think carefully in advance about the feasibility of taking out our uninsured care product or how you can make this feasible, for example by means of a PGB. The costs can add up quickly.

In the event of cancellation or late cancellation by telephone, i.e. before 9:00 a.m. on the first working day prior to the appointment, the right is reserved to charge the time reserved for the patient in accordance with the valid rate of the missed appointment. Always leave a voicemail and send an e-mail to adminfin@imindu.nl and your practitioner.

Statutory personal contributions can also be invoiced directly to the patient. The patient cannot withdraw from payment for a treatment given by the practice of iMindU B.V. if it later appears that he/she is not insured, or when his/her health insurer, municipality/PGB provider embassy/consulate is not prepared to refund invoices.

The responsibility for finding out which reimbursements and conditions the health insurer or the municipality/PGB provider of the patient uses lies entirely with the patient or his/her legal representative. What is and is not possible in terms of reimbursements is constantly changing and must therefore be checked with the provider itself. iMindU B.V. cannot be held or held liable for information provided or not provided and costs incurred.

The patient or his/her parents must immediately notify iMindU B.V. of any complaint or objection about treatment. The payment obligation is not suspended because the patient submits a complaint to the complaints committee to which iMindU B.V. is affiliated or to another body.

The legal representative of the aforementioned child or patient hereby declares to be familiar with these general terms and conditions and payment conditions, as well as with the information on the iMindU B.V. website.



GENERAL TERMS AND CONDITIONS IMINDU B.V.

iMindU B.V. would like to provide you with the best possible and customized service. With this document we would like to inform you in advance about our services. The general and payment conditions and the informed consent are part of the treatment agreement that you conclude with us.

1. Care

You will be taken care of by iMindU B.V. or use another service. If you are being taken into care, your iMindU B.V. practitioner will draw up a treatment plan together with you after first making an inventory of your request for help, having done a psychiatric assessment and, if possible, an interview (hetero-anamnesis) with your partner, parents, boyfriend or girlfriend, in consultation with you and to have carried out further diagnostics. When you sign the treatment plan, the treatment will be carried out according to the treatment plan. The treatment plan can be adjusted in consultation if necessary. You can stop the treatment at any time. iMindU B.V. can only terminate the agreement if there is a special reason. For example, consider not cooperating with treatment, inappropriate or aggressive behavior by you towards the treatment team or property, see our house rules and covid protocol that you and your children are expected to adhere to, or failure to pay invoices. We may be forced to unilaterally cancel or reschedule an appointment in the event of a crisis involving another patient and/or an emergency or illness of the practitioner. We ask for your understanding.

2. Compensation

iMindU B.V. offers psychiatric treatments in specialist mental health care, but for the time being largely uninsured (health insurers) and uncontracted (municipalities). For this you need a valid, timely and specific referral from your doctor or general practitioner. In most cases, the treatment is reimbursed by your health insurer, please ask in advance. Depending on whether you have a reimbursement policy, or an in-kind policy and which conditions are attached to this, the costs of diagnostics and treatment will be fully or partially reimbursed.

As an adult, you must be insured with a health insurer for the entire duration of the treatment agreement, and you must be registered with a Dutch municipality affiliated with the VNG. All treatments are insured under the basic insurance, unless stated otherwise, as may be the case with regards to the personal contribution for psychotherapy. However, the statutory deductible applies and possibly an additional deductible if you have agreed this with your health insurer. Your health insurer will send you an invoice for the amount that falls within your deductible. If you have any questions about this, it is best to contact your health insurer. More generally, we recommend that you read your policy conditions very carefully and ask your health insurer questions if you do not understand something.

For a minor, the treatment at iMindU B.V. is reimbursed at a number of municipalities with which we have a contract if the minor qualifies for this and has a referral from the JeugdGezinsTeam or GP. For other municipalities and for minors that we cannot see on a municipal budget, the treatment at iMindU B.V. as an uninsured product is not reimbursed by the municipality, but you have a chance of receiving full or partial reimbursement if you have applied for a Personal Budget (PGB) in advance at the municipality where the child is registered.

iMindU B.V. will declare the costs of diagnostics and treatment and any crisis management or referral to another care provider or clinical department of a (psychiatric) hospital directly to you, unless a child is treated on a municipal budget. In all other cases you therefore owe the costs of the treatment directly to iMindU B.V.. iMindU B.V. can transfer any claim against you to a third party and in that case you can only pay to this party.

If you have agreed to pay the costs to iMindU B.V. yourself, iMindU B.V. will make an estimate in advance of what a diagnostic and/or treatment process could cost, depending on the form of funding, if this is possible and subject to additional costs, both regular and in connection with crises that arise or a necessary referral to a clinic and the time involved. If you appreciate this, we can send you a cost estimate, for example for applying for a PGB or check with your embassy or international health insurer whether they will (partially) reimburse costs. We reserve the right not to provide a cost estimate if the costs to be incurred are predictably unclear, for example if there is a safety issue with regards to you, your children or family. It is then difficult to estimate costs because the costs of cooperation with (security) chain partners, intervention, obtaining advice and legal costs are incalculable and can vary enormously. In such a case, it may be that we must continue to treat due to a duty of care or that we will stop the treatment and refer you to another healthcare provider or refer you back to your GP.

3. Intake and treatment

Each treatment is preceded by an intake interview. In this, together with you or you as parents, it is determined what your request for help is. Subsequently, a (child) psychiatric assessment with hetero-anamnesis and the gathering of information from previous care providers and third parties is scheduled to find out exactly what is going on. After this has been completed, a multidisciplinary consultation will take place from which advice will be given regarding the treatment of you or your child and family (first advice meeting). During the consultation, the provisional diagnosis and the provisional treatment plan will be discussed with you or your child and you as parents. The intake consists of 1-2 sessions of approximately one to two hours. A psychiatric assessment consists of 1-2 conversations of an hour and a half. A child psychiatric assessment consists of 1-2 conversations and/or observations of an hour and a half. Hetero-anamnesis of parents or partners usually requires 1-2 conversations of an hour to one and a half hours. Obtaining information from former or



involved practitioners takes time, depending on the nature of the information and the amount of information to be obtained and the processing thereof, an average of one hour.

A consultation usually lasts an hour to an hour and a half. If necessary, a second consultation can be scheduled. If we indicate extra diagnostics, there will be a second advice meeting after these diagnostics have been completed. The treatment plan will be made up accordingly.

We strive for clarity in your treatment, so that you know where you stand. For this reason, we make an estimate of the treatment duration and the treatment method, if possible, on the basis of the treatment goals agreed with you prior to the treatment. We aim to complete your treatment within the stipulated time as possible. We appeal to your own active commitment, child and parents, during the treatment to jointly achieve a good recovery and to ensure that the result of your treatment is permanent. Your therapist will advise on this, discuss the options and scenarios that are at hand with you, your child and parents, and you and/or your child are expected to follow the choice made. You should inform your practitioner as much as possible and to the best of your knowledge about important information that is necessary for the treatment. If during the course of the diagnosis and treatment it appears that more is needed than initially thought, we will adjust the treatment plan in consultation with you to the new treatment goals and estimated terms.

4. Directing Therapist

In GGZ it is mandatory that a coordinating practitioner monitors your treatment plan. The coordinating practitioner is a medical specialist, in the case of iMindU B.V. a (child and youth) psychiatrist, or psychotherapist or clinical psychologist, who is ultimately responsible for the treatment in accordance with the guidelines. You will always first have an appointment with the coordinating practitioner. The coordinating practitioner is present at the location on set days and times. In view of the limited possibilities in the agenda, you will receive an appointment with the coordinating practitioner when it suits him or her. In principle, it is not possible to schedule an appointment at other times.

5. Canceling appointments or not showing up for an appointment

The treatment takes place by appointment. If you have an appointment with us that you cannot keep, we ask that you cancel it at least 24 hours in advance. If you do not cancel with us in time (at least 24 hours before the appointment, that is '**no show**'), we are forced to charge the scheduled time in full. The costs for this are those of the diagnostics or treatment session that you would actually have had and depend on the discipline that would perform it and the funding model that you have agreed with us. You can cancel by telephone via telephone number 088-2919677 or by e-mail to adminfin@iMindU B.V..nl (also during the weekend) and also via the patient portal to your practitioner so that both the secretariat and your practitioner are informed that you are not coming. **Appointments on Mondays or after public holidays must be canceled 24 hours before the Saturday or public holiday.**

6. Emergencies and opening times

Our practice does not have 24-hour availability or mobile crisis service for the region but can be reached between 8.30 am and 4 pm from Monday to Friday on 088-2919677, fax 088-2919678. In the event of an emergency, outside office hours and during the weekend, it is best to contact your (on call) general practitioner or the general practitioner or the nearest hospital in emergency. If necessary, the GP post can contact the GGZ mobile crisis service outside office hours.

7. Quality

We believe it is important to properly measure your progress, your patient experience and patient satisfaction. You can share your tips and tops on the patient satisfaction form (downloadable from the website), by e-mail and preferably with your practitioner. We use your input to continuously adjust our actions in order to be able to deliver optimal quality. The health insurance companies also require these measurements. That is why we send you digital questionnaires (ROM) during the intake, after every 6 months, and at the conclusion of the treatment. By signing this agreement you commit to completing these questionnaires. The results of these questionnaires will be discussed with you and used anonymously for further research, which can further improve the quality of these treatments. You can also ask for these result measurements yourself. The quality charter of iMindU B.V. can be found at the practice and can also be downloaded from the website <https://www.imindu.nl>.

8. Medical confidentiality

The practitioners of iMindU B.V. have a medical confidentiality obligation. We do not provide information about you to others without your permission. Also, without your permission, others will not be able to inspect and receive copies of the documents as recorded in your patient file, not even after death. We do, however, like to keep your referring doctor or general practitioner informed about your treatment as a gatekeeper for your health. For this we ask you to send the attached declaration of consent signed in advance to the intake interview as part of the intake package. In the event of danger or acute or structural violence in the family, other rules apply, which sometimes require that medical confidentiality must be breached based on a conflict of duties.

9. Patient record

The practitioner sets up your file with information about your diagnosis, the treatment, the results of the questionnaires and interview reports. iMindU B.V. will keep your file for fifteen years, counting from the time the file was opened, unless it concerns child abuse, neglect or sexual abuse. In that case, iMindU B.V. will keep your file for 40 years in accordance with



legal requirements. At your request, you will receive access to and a copy of your patient file as soon as possible.

If it concerns information about someone involved with you, different rules apply. In some of those cases you will not be able to inspect or obtain a copy of the file. This mainly concerns the question of whether this information conflicts with the interest of protecting the privacy of another person. At the request of the patient, iMindU B.V. destroys the patient file records and data kept within three months, unless the request concerns documents or data of which it is reasonably plausible that the retention is of considerable importance to someone other than the patient or a statutory provision precludes destruction.

10. Privacy and Complaints Procedure

iMindU B.V. has a privacy policy, privacy statement and a compliments and complaints procedure. You will receive our privacy statement together with this treatment agreement. This, together with the other documents, can be downloaded from the iMindU B.V. website and viewed at the practice. A copy is also available there. The iMindU B.V. practitioners are bound by a professional code. More information about these professional codes can be found on the websites of the various professional associations.

11. Communication

Your practitioner and iMindU B.V. send all correspondence and, if applicable, the invoices to the contact details provided by you as a patient or parent/legal representative of the patient, preferably digitally. It is your responsibility to keep this information up to date.

The correspondence address of iMindU B.V. is: Rapenburg 34A, 2311 EX, Leiden, the Netherlands.



You hereby indicate that you have read and understood all of the above with regard to the treatment agreement, general and payment conditions and that you agree to this.

Leiden, date

Signatures

Patient (12-16 years):

Patient (> 16 years):

Parent/Legal Representative 1:

Parent/Legal Representative 2:

Practice owner iMindU B.V./directing practitioner:
mw. dr. M.J. van Hoof