



TELUS Health is committed to continuous improvement. Thank you for taking the time to provide your feedback. As our counselling service is confidential, we require your written consent to discuss the outcome of the complaint investigation with your organisation. Thank you for providing that below.

Client Details Organisation Client's name Contact number Email address

Consent	YES	NO
Do you provide consent for TELUS Health to pass on your feedback to the provider involved (if relevant)?		
Do you provide consent for TELUS Health to contact you if we need further information to investigate your complaint?		
Do you provide consent for TELUS Health to provide feedback to your organisation's EAP contact person regarding the complaint investigation?		
If no, we will still investigate your complaint. However, as this is a confidential service we can't confirm or deny to your organisation that you have accessed our service or report back on the findings of our investigation without your consent.		
Would you like to be contacted by the TELUS Health Client Care Team to arrange a different clinician or get help making an appointment?		

Signature

Olymature	
Date	
Please provide the name/s of the person/people you wish us to release the information to at your organisation	
Client's Signature	

By submitting this form, I understand & agree that:

- Only relevant information will be shared, while protecting the confidentiality of other details obtained in the feedback and/or complaints investigation process.
- Written information will be stored for a period of seven years and then disposed of in a secure manner.
- Confidential information may be released without my consent only when it is subpoenaed by a court, or when not disclosing the information may place me or others at risk of serious harm
- Once information is released to a third party, TELUS Health no longer has control of the security of this
- I have read this Release of Information Authorisation, understand it, and am signing it voluntarily.

Please submit this completed form to your EAP Contact Person to escalate with your TELUS Health Customer Success Manager. Thank you again for providing your feedback for our continuous improvement.