

## UNIQUE FORM FOR PSYCHOLOGICAL PROFESSIONAL PERFORMANCE

The undersigned Sara Basso-Moro, enrolled in the *Ordine degli Psicologi della provincia di Trento* with n. 01090 and noted in the list of psychotherapists, before carrying out her professional work in favor of Mr/Ms

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informs you of the following in relation to the **INFORMED CONSENT:**

- the psychotherapy that we are going to perform is aimed, through the therapeutic alliance and collaboration by the client(s), to achieve a better psychological balance, better self-realization and realization of personal abilities/potential; to increase self-knowledge and acceptance of one's limits; to the reduction of psychic suffering;
- the psychotherapy will be humanistic with a gestalt approach;
- there are other psychotherapeutic approaches besides that used by the professional;
- the services will be provided at the professional's office located in Via Gocciadoro, 38122, Trento or electronically (video conference, chat) via Skype/Zoom/Google Meet platform, or similar digital systems;
- the study does not have a waiting room, so please ring the bell at the exact time of the appointment. In addition, the studio does not have a toilet;
- the benefits and effects achievable through psychotherapy are as follows: reduction of psycho-emotional suffering; promotion of psychological well-being; achievement of a better personal psychic balance; improvement of relationship skills; improved management of one's emotional states and impulses; achieving a better understanding of oneself and the other;
- psychotherapeutic treatment may in some cases be ineffective and unable to produce the desired effects (in which case the professional will take care of adequately informing the client(s) and assess whether to propose the continuation of the therapeutic relationship, whether to hypothesize other strategies and/or therapeutic courses, or whether to interrupt it);
- the client can stop the psychotherapy at any time. In this case, he/she ensures to communicate to the professional the desire to terminate the professional relationship and makes himself/herself available as of now to carry out a last meeting aimed at summarizing the work done;
- the psychotherapist can interrupt the psychotherapeutic treatment at any time, for personal necessity and/or impediment, or for needs related to the effectiveness of the psychotherapy itself, and may also advise the client(s) to take advantage of the services of another psychotherapist;
- the psychotherapist, if he deems it appropriate, may suggest to the client(s) the intervention of another specialist or if he deems it necessary, he can advise the client(s) the intervention of a medical specialist both for organic pathologies and for psychopharmacological therapies;
- the psychologist is required to comply with the Code of Conduct of the Italian Psychologists which, among other things, imposes the obligation of professional secrecy, which can only be derogated with the patient's valid and demonstrable consent or in the absolutely exceptional cases required by Law;
- due to the nature and peculiarity of the service, it is not possible to define the duration of the intervention a priori. However, the intervention will be divided into: a) an initial phase: a maximum of n. 5 weekly sessions aimed at exploring the client's history, the motivations behind the request for psychotherapeutic treatment, the expectations with respect to the same as well as the affinity between client, therapist and therapeutic approach; b) taking charge: weekly sessions (or one session every two weeks) alternated with follow-up sessions to evaluate the progress of the therapeutic path, to be carried out hypothetically every 10 sessions;
- individual sessions will last ~50 minutes, couple sessions will last ~75 minutes;

- depending on the client's consent (to be made through the point at the end of this letter), some sessions may be recorded (in audio or audio-video mode if online therapy) by the therapist for exclusively personal purposes, such as maximizing the quality of the therapeutic intervention. If there was an intention by the therapist to record a session, this will always be communicated in advance and agreed with the client. The client, unless signed consent of the therapist, will not be allowed to record the sessions;
- Dr. Sara Basso-Moro is insured with Third Party and Professional Liability Policy n. 500216023 signed with Allianz S.p.A., Milan, ceiling of Euro 1.000.000 per event/period, and regularly participates in supervision and/or intervision sessions in order to guarantee the best quality of the therapeutic interventions;
- pursuant to art. 9 paragraph 4 of Legislative Decree n.1/2012 (converted, with modifications, by Law n.27/2012, and modified by paragraph 150 of Law n.124/2017), an **ESTIMATE OF THE COSTS** is formulated in the following terms: the remuneration to be paid for each session is equal to Euro 65 in case of individual therapy, Euro 55 in case of individual therapy with university students, Euro 85 in case of couple therapy. An additional 2% of the total to be compulsorily assigned to the ENPAP pension fund and the following charges must be added to the remuneration: stamp duty of Euro 2 if the invoiced amount is greater than Euro 77,47. The transaction is exempt from VAT (pursuant to art.10, paragraph 1, n.18 of Presidential Decree n.633/1972);
- the compensation, which will also be paid in the event of cancellation of the session by the client(s) if this occurs beyond 24 hours from the agreed appointment, can be paid ☐ at the end of each session or ☐ at intervals of 5 sessions, to be paid in advance, with a 10% discount on the total (*please indicate your preference*). Payment will be made by electronic payment (when available) at the end of the session or by bank transfer within 3 days of receipt of the invoice (IBAN: IT36W0301503200000003568187; Message: name and surname, invoice number as indicated on the invoice itself).

Please note that the compensation indicated above is formulated with reference to the *Nomenclatore del Consiglio Nazionale dell'Ordine degli Psicologi* and that it cannot be conditioned on the outcome or results of the professional intervention.

Furthermore, the undersigned Sara Basso-Moro informs you of the following in relation to the **PROCESSING OF PERSONAL DATA IN ACCORDANCE WITH EU REGULATION 2016/679**:

1. The EU Regulation 2016/679 (hereinafter GDPR) provides for and strengthens the **protection and processing of personal data** in the light of the principles of correctness, lawfulness, transparency, protection of confidentiality and the rights of the interested party regarding their data.
2. Dr. Sara Basso-Moro is the **controller** of the processing of the following data collected for the implementation of the assignment agreed by this contract:
  - a. personal, contact and payment data - information relating to name, telephone number, PEO (ordinary email address) and PEC (certified email address), as well as information relating to the payment of the psychotherapy fees (e.g., credit/debit card number), etc.
    - *Prerequisite for processing*: execution of contractual/pre-contractual obligations. The conferment is mandatory.
  - b. data relating to the state of health: the personal data relating to our/my physical or mental health are collected directly, in relation to the request for the execution of assessments, exams, diagnostic assessments, rehabilitation interventions, and any other type of professional service connected with the execution of the psychotherapy.
    - *Prerequisite for processing*: execution of contractual/pre-contractual obligations. Consent is mandatory.

The term *personal data* refers to the categories indicated above, jointly considered. The professional reflections/assessments/interpretations translated into data by the psychologist constitute the set of *professional data*, processed according to all the principles of the GDPR and managed according to what

indicated in the Code of Conduct of the Italian Psychologists.

3. Personal data will be subjected to both paper and electronic and/or automated **processing methods**, therefore with both manual and IT methods. In any case, all suitable procedures will be adopted to protect confidentiality, in compliance with current regulations and professional secrecy.
4. Adequate **security measures** will be used to ensure the protection, security, integrity and accessibility of personal data.
5. Personal data will be **kept only for the time necessary** to achieve the purposes for which they were collected or for any other legitimate purpose connected to them.
6. Personal data that is no longer necessary, or for which there is no longer a legal requirement for its conservation, will be **irreversibly anonymized or safely destroyed**.
7. The storage times, in relation to the different purposes listed above, will be as follows:
  - a. personal, contact and payment data: they will be kept for the time necessary to manage the contractual/accounting obligations and subsequently for a period of **10 years**;
  - b. data relating to the state of health: they will be kept only for the period of time strictly necessary for the performance of the psychotherapy and for the pursuit of the aims of the psychotherapy itself and in any case for a minimum period of **5 years** (art.17 of the Code of Ethics of the Italian Psychologists).
8. Personal data may have to be made **accessible to the Health and/or Judicial Authorities** on the basis of specific legal duties. In all other cases, any communication can take place only with explicit consent, and in particular:
  - a. personal, contact and payment data: they may also be accessible to any employees, as well as to external suppliers who support the provision of services;
  - b. data relating to the state of health: as a rule, they will be disclosed only to the interested party and only in the presence of a written delegation to third parties. Any means suitable to prevent unauthorized knowledge by third parties will be adopted. In the event of legal obligations, they may be shared with structures/services/operators of the NHS or other public Authorities.
  - c. data relating to the state of health, as well as age, gender and professional data, may also be shared with external psychotherapists during supervision and/or intervention sessions. Please note that anonymity will be guaranteed and that all psychotherapists are required to comply with professional secrecy.
9. Unless otherwise stated, the accounting information relating to healthcare expenses will be sent to the Revenue Agency, via the *Sistema Tessera Sanitaria* electronic flow, for the purpose of processing the precompiled form *mod.730/UNICO* and will also be accessible by the subjects to whom you were to be fiscally dependent (spouse, parents, etc.). The opposition to the sending of data (to be made through the point at the bottom of this) does not affect the deduction of the expense, but only entails that the invoice is not automatically inserted in the pre-filled declaration.
10. Any **list of data processors** and other subjects to whom the data are communicated can be viewed on request.
11. If certain conditions persist, in relation to the specificities connected with the execution of the psychotherapy, it will be possible for the interested party to exercise the **rights referred to in articles 15 to 22 of the GDPR** (such as, for example, access to personal data as well as their correction, cancellation, limitation of processing, copy of personal data in a structured format commonly used and readable by an automatic device and the transmission of such data to another data controller). In this case it will be the professional's responsibility to verify the legitimacy of the requests by providing feedback, as a rule, within 30 days.
12. The privacy policy of Sara Basso-Moro's professional website, [www.sbmpsychologyandsupport](http://www.sbmpsychologyandsupport), can be

found at the following address: <https://www.wix.com/about/privacy>.

13. For any complaints or reports on the methods of data processing, it is good practice to contact the Controller of data processing. However, it is possible to forward your complaints or reports to the Data Protection Authority, using the following contact details: Garante per la protezione dei dati personali - piazza di Montecitorio n.121 - 00186 ROMA - fax: (+39) 06.696773785 - telefono: (+39) 06.696771 - PEO: garante@gpdp.it - PEC: protocollo@pec.gpdp.it.

**READ AND UNDERSTOOD all of the above**

Mr/Ms \_\_\_\_\_ born in \_\_\_\_\_ on \_\_\_\_\_

and resident in \_\_\_\_\_ street \_\_\_\_\_ n. \_\_\_\_\_ CAP \_\_\_\_\_

C.F. \_\_\_\_\_

telephone \_\_\_\_\_

email address \_\_\_\_\_

and

Mr/Ms \_\_\_\_\_ born in \_\_\_\_\_ on \_\_\_\_\_

and resident in \_\_\_\_\_ street \_\_\_\_\_ n. \_\_\_\_\_ CAP \_\_\_\_\_

C.F. \_\_\_\_\_

telephone \_\_\_\_\_

email address \_\_\_\_\_

*(to be followed)*

Psychology & Support

Having received specific professional information and adequate information in relation to costs, purposes and methods of the psychotherapy, **he/she expresses its free consent**, by ticking the box below, **to the psychotherapy and the quotation indicated above**:

☐ PROVIDE(S) CONSENT

Having received specific information on the processing of personal data and in relation to what is indicated in relation to the processing of data relating to the state of health, **he/she expresses its free consent**, by ticking the box indicated below, **to the processing and communication of their personal data for all the purposes indicated in this statement**:

☐ PROVIDE(S) CONSENT

Having received specific information regarding the possibility of recording the sessions by the therapist in order to maximize the quality of the therapeutic intervention, **he/she expresses his free consent/dissent**, by ticking one of the boxes below, **to register the therapeutic sessions after communication by of the therapist**:

☐ PROVIDE(S) CONSENT

☐ DOES NOT / DO NOT PROVIDE CONSENT

With regard to the **sending to the Agenzia delle Entrate of personal data, contact details and payment via the Sistema Tessera Sanitaria electronic flow** for the purposes of the pre-filled tax return:

☐ PROVIDE(S) CONSENT

☐ DOES NOT / DO NOT PROVIDE CONSENT

Place and date \_\_\_\_\_

Signature(s) \_\_\_\_\_

Dott.ssa Sara Basso-Moro

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