

Confidentiality Agreement

Confidentiality is very important when it comes to seeking help and we need to know that you understand how confidentiality works at this school.

Confidentiality means keeping personal information private and safe. This information includes things that young people talk about with The College Psychologist and the information that is stored on your file. It can also include information that parents, education staff or other services tell the College Psychologist. You can ask The College Psychologist about information stored on your file.

If the College Psychologist believes that you understand how confidentiality and consent works, you can see them at your own request but we prefer your parent(s)/carer to know if possible. Sometimes it is important to share information with your parents and we would usually talk to you about this.

The College Psychologist works as part of the education team and may provide recommendations to teachers or parents. Only information that is essential to support your wellbeing is shared. During school time the school needs to know the whereabouts of all students so your attendance at appointments is noted by key staff.

If The College Psychologist needs to share information with another service, they will discuss this with you or your parent and you will be asked to give your permission for this to happen.

Your information may not remain private if we are concerned that you are: (1) At risk of harming or killing yourself; (2) Being harmed, or at risk of being harmed; or, (3) Harming someone else or at risk of harming someone else. Confidentiality can also be broken for other reasons such as a court subpoena or other legal requirements such as child protection or criminal activity.

The College Psychologist may not always be able to talk with you about breaking confidentiality; to explain what they'll share, who they'll tell, and why. While the College Psychologist is not able to guarantee the outcome of any information shared they will stay involved with your care and support.

Student Consent

I agree that the College Psychologist has explained the Confidentiality Agreement and that I have read and understand the conditions associated with seeing the College Psychologist.

Name of Student DOB

Signature of Student Date

CEDWW Secondary School Psychology Service
