Consent to Service and Authority to Share Information



headspace Midland is an early intervention service which provides support to young people for a range of health and wellbeing issues - including physical and mental health, alcohol and other drugs, vocational support (i.e. engaging with school and work). headspace Midland employs professionally qualified counsellors from a range of disciplines including Psychology, Social Work, Occupational Therapy, Nursing, Counselling/Psychotherapy, and Psychiatry. We also have a number of clinicians from local youth mental health services that can provide support on site.

Is my information confidential?

Confidentiality is important in building a relationship with you and will be discussed early on in your sessions. This means that whatever you discuss in sessions remains private and will not be passed on to anyone else without your permission.

However, there are some *exceptions* to this:

- If there is concern that you or another person is at imminent risk of harm;
- If your written consent has been obtained to share information to:
 - o another person (eg family member, employer)
 - another agency;
- Your information will be shared with our clinical team when we are discussing possible care
 options for you.
- If case files are subpoenaed by court in which case we will make every effort to let you know about the request.

What information do we collect?

As part of providing support, we will need to collect and record personal information from you that is relevant to your situation. Your personal information will be recorded in a secure headspace database which no-one outside of the headspace service will have access to. Your worker may also discuss your progress at team meetings - is to ensure you are provided with the highest possible standard of care. In this case, the identifying information discussed will be kept to a minimum with respect to the client.

You can access information kept about you under the Privacy Act (2000). Ask your counsellor or the headspace Midland manager about how to go about this.

We will seek your consent before we share information with any other health services, community agencies, family members and/or friends.

What information do we share?

headspace Midland is made up of headspace core staff and co-locating health professionals from various organisations. By signing this form you are giving headspace staff permission to discuss information relating to yourself with co-locating professionals.

On occasion, headspace Midland may also have to provide random files for a confidential review by accredited body to ensure we are working in line with the National Mental Health Standards; but this will not focus on individual details shared with a counsellor.

If you need clarification on any of these matters, please speak to a headspace staff member.



Details:



I have read and understood the above information and consent to participate in this service as outlined and understand that I can withdraw my consent at any time.

It has been explained to me that: (Please tick the following) ☐ There are some instances where my headspace Midland clinician may have to break confidentiality to keep me or someone else safe. ☐ This is a voluntary service and I can choose to leave and not come back at any time. ☐ If I have any worries about the service I receive; I can talk to my clinician or contact the manager of headspace Midland. ☐ I have received a Welcome Pack which includes my Rights and Responsibilities for care and treatment at headspace Midland, and these have been explained to me. ☐ I may choose to nominate and involve family/carers/friends/others in my care, and I've been offered a Family and Friends pack with information about the services. ☐ Each time I come to headspace, reception will ask me to complete a hAPI survey on an iPad. The information collected on the iPad will be used by headspace Midland staff to assist in providing me with the best support possible. This information then becomes anonymous and is shared with the headspace National Office to assist with evaluation and research. □ Due to the number of people wanting to access headspace, we require 24 hours notice of cancellation so that we may fill that appointment for someone else. We understand that this always isn't possible, but we appreciate a phone call if you can't make an appointment. If you miss more than one appointment without letting us know, you may have to go back on a waitlist. If you are facing barriers to contacting us, or getting to appointments, please talk to us about how we can help. Young person Signature: Name: Date: Witness (headspace staff member): Name: Date Signature: If young person is under 16, consent should be provided by parent/guardian/carer below: Parent / Guardian Name: Signature: Date: Second Parent / Guardian: Name: Signature: Date: Are there any current Custody or Parenting Orders in place? \Box Yes \Box No