***We gain consent for the information we hold. We only hold and use information vital to your care.***

**The information we hold**

At Headspace Guildford we collect and keep the following information:

* Your name, address and phone number and the name of your child
* Your GP details
* Any relevant information about other agencies involved with your family or your child
* Any relevant information about your child’s medical history pertinent to their care

We may also collect

* Reports from other professionals including medical reports, psychometric or cognitive testing reports, school reports or information.
* Letters from insurance companies (where relevant)

We also keep brief factual notes on each session and any phone calls detailing the activities undertaken and other relevant information you might choose to share with us.

This information is held securely in a file with your child’s name on it. This information is kept until your child turns 21. Only Headspace Guildford staff have access to this information.

Any electronic information we hold which contains identifiable data (including, but not limited to reports or invoices) are stored on an encrypted memory stick which only the clinicians have access to.

**Sharing information**

*We do not share information other than with those directly involved in your child’s care and in almost all cases we only share information with consent.*

Cases are discussed in supervision. Any information remains confidential as both psychologists in this relationship are bound by the professional and ethical rules of their profession.

We may ***have*** to share information if we feel someone is at risk. This might be with your GP or with a statutory agency (such as Children’s Services). Wherever possible we will discuss this with you first but we may have to do this without consent in some circumstances.

We may feel it is important to share relevant information with another professional involved in your child’s care (for example a Paediatrician). We will discuss this with you first.

Where your work is being funded by an insurance company or other third party we have to share some information (name, address and brief details about treatment) with them for the purposes of invoicing. They may also request a letter detailing the assessment and treatment plan. We will share this with you first.

Please do ask us if you have any questions or need more information about the information we hold and use (now or in the future).

-----------------------------------

I understand that Headspace Guildford holds and processes information about me and my child. I give my consent for them to use information as listed above.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Signed) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name) \_\_\_\_\_\_\_\_\_\_\_\_ (Date)