

**Informed Consent and Limits of Confidentiality**

I, (print name) \_\_\_\_\_, am consenting to be seen by the school counsellor (Rebecca Nydr) for counselling at Aberdeen Hall Preparatory School.

**Assumption of Risk and Benefits:**

Therapy sessions carry both benefits and risks. Therapy sessions can significantly reduce the amount of distress someone is feeling, improve relationships, and/or resolve other specific issues. However, these improvements and any “cures” cannot be guaranteed for any condition due to the many variables that affect these therapy sessions. Experiencing uncomfortable feelings, discussing unpleasant situations and/or aspects of your life are considered risks of therapy sessions.

**Limits of Confidentiality:**

The information that the student discloses during the therapy session is kept confidential within the Student Support Team. No contents of the therapy sessions, whether verbal or written, may be shared with another party (outside of the Student Support Team) without written consent of the student or the written consent of the legal guardian.

The Student Support Team is responsible for maintaining the school safety, climate, and culture at Aberdeen Hall. *There are certain situations (such as a court ordered subpoena), where, by law, the Student Support Team or School Counsellor is required to disclose confidential information (see below).*

**Duty to Warn and Protect**

If the student discloses a plan or threat to harm themselves, the Student Support Team must attempt to notify the family and notify legal authorities. In addition, if the student discloses a plan to harm or threaten to harm another person, the Student Support Team is required to warn the possible victim and notify legal authorities.

Keeping the student safe means that if the student discloses anything that could be a threat to the safety, climate, or culture of Aberdeen Hall it will be addressed and handled according to the School Code of Conduct.

**Abuse of Children and Vulnerable Adults**

If the student discloses, or it is suspected, that there is abuse or harmful neglect of children or vulnerable adults (i.e. the elderly, disabled/incompetent), the Student Support Team must report this information to the appropriate provincial agency and/or legal authorities.

*By signing below, I agree to the above assumption of risk and limits of confidentiality and understand their meanings and ramifications.*

Student/Parent/Guardian Signature:

Date of Signature:

\_\_\_\_\_

\_\_\_\_\_

School Counsellor Signature:

Date of Signature:

\_\_\_\_\_  
*Rebecca Nydr, BA, MA, RCC*

\_\_\_\_\_