

# <u>Consent Form</u> (Parent/Carer) Digital Video Recordings & Case Reports CYP Training

## **Information**

Your or your child's therapist/practitioner is currently part of a graduate or post-graduate training at the University of Exeter helping them become more highly skilled and effective at their job. The University has to be sure your or your child's therapist/practitioner is working to the highest standards. Some of the courses we run are accredited by the British Association for Behavioural and Cognitive Psychotherapies (BABCP) and the Association of Family Therapy & Systemic Practice (AFT). Your or your child's therapist/practitioner can tell you more about this if you wish.

One way the University does this is asking your or your child's therapist/practitioner to regularly record sessions using digital video, and to write "case reports". These are used for supervision and assessment. Recordings are securely stored on encrypted devices at all times. Video cameras or 'tablets'/lap-tops may be used to make this recording– you or your child can ask to be recorded from behind if this makes you or them feel more comfortable.

Supervision means meeting with small groups of other therapists/practitioners doing the same sort of work. Another more senior therapist/practitioner discusses what your or your child's therapist/practitioner is doing. Sometimes they will look at recordings to do this and will give feedback and advice to your or your child's therapist/practitioner on how to fine-tune and develop their skills. Sometimes your or your child's therapist/practitioner will meet just with their supervisor one to one to get feedback and advice about making sure their work is as good as it can be. Some recordings of sessions are used by the University for assessment.

"Case reports" describe details of the work you and/or your child is engaged in so we can make sure the therapist/practitioner is doing this well and can get even better at it. Personal details that could identify you or your child will be removed from reports – for example names will be changed. Anyone seeing the case reports or recordings will keep the contents confidential. If you want, your or your child's therapist/practitioner will talk to you about the report and how it was written up to make you aware of the contents. Recordings and case reports will be stored separately under secure conditions for six years after your or your child's therapist/practitioner has graduated.

You can take away your consent at any time if you want without giving a reason. The work you or your child is engaged in will not be negatively affected in any way if you decide to do this. If you take away your consent after a recording or report has been handed in for assessment, then it will have to be kept by the University for the normal length of time but will not be used for anything other than assessing your or your child's therapist/practitioner.

Please read the statements below and sign for each one you agree with and add the date.

#### Consent for digital video recordings

- I understand that my/my child's therapist/practitioner is currently undertaking specialist graduate/post-graduate training at the University of Exeter and as part of this training, his/her supervisors and/or course tutors will view recordings of therapy.
- I am happy for my/my child's/my family's sessions to be digitally video recorded and for the recordings to be used for supervision and to be submitted to the course tutors for assessment purposes.
- I understand that I can take away my consent at any time, up to the point that recordings are handed in, without giving a reason and that this will not negatively affect my or my child's legal rights or the work me or my child is engaged in. If I take away consent after the recording is handed in, it will be kept by the University for six years, but will not be used for other training reasons.
- I agree to the use of my/my child's recordings in the ways described above in this consent form.

Signed Parent/Carer:

Date: \_\_\_\_\_

Signed Therapist/Practitioner: \_\_\_\_\_

Date:

### Extra consent for teaching

It is very helpful sometimes to use real life examples of sessions for training other therapists/practitioners. The contents of any sessions shared in this way would be kept confidential.

- I am happy for recordings of my/my child's/my family's sessions to be used for teaching at the University.
- I understand that I can take away my consent for this specific purpose at any time without giving a reason and that this will not negatively affect in any way the work me or my child is engaged in.

Signed Parent/Carer: \_\_\_\_\_ Date: \_\_\_\_\_

Signed Therapist/Practitioner\_\_\_\_\_ Date: \_\_\_\_\_

All recordings will be stored in accordance with the Data Protection Act (DPA), 2018.

# **Consent for Case Reports**

I understand that my/my child's therapist/practitioner is currently undertaking specialist graduate/postgraduate training at the University of Exeter, and that as part of this training they must hand in written case reports of some of their work for assessment and training, and that these reports will be looked at by staff and trainees of the training course attended by my/my child's therapist/practitioner.

I understand that although every attempt will be made to make details anonymous that could be used to identify my child, me or my family, it may be difficult to remove all identifiable information.

I understand that I can take away my consent at any time, up to the point that reports are handed in, without giving a reason and that this will not negatively affect my child's legal rights or the work me or my child is engaged in. If I take away consent after the report is handed in, it will be kept as an assignment by the University for six years, but will not be used for other training reasons.

I confirm that my /my child's therapist/practitioner has given me all the information I need about the report. I have had the opportunity to read this information and think about it, ask questions and have these answered.

Signed Parent/Carer:	Date:
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Signed Therapist/Practitioner	Date:

All written reports will be stored in accordance with the Data Protection Act (DPA), 2018

#### Therapist Statement

"I certify that I have conducted this clinical work in line with appropriate professional practice guidelines, Codes of Ethics [e.g. BABCP/AFT/ BPS Standards of Conduct, Performance and Ethics/ AVIGuk values and beliefs] and workplace policies, which have been strictly adhered to in terms of making the recording and/or writing the case report and in seeking permission for their use. **This signed consent form will accompany the recording or case report.** 

I confirm that I have offered my client the opportunity to discuss the content of any case report and how it was presented"

Name of Therapist/practitioner: .....

Signed Therapist/Practitioner: .....

Form last updated 11 Oct 2019