



**IntroConnect**

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## Consent to Obtain and/or Release Information

<b>Name:</b>		<b>DOB:</b>
<b>Address:</b>		<b>Phone:</b>

I, \_\_\_\_\_ (client or representative), provide consent for IntroConnect to Obtain &/or release Information from/ to the following:

<b>Organisation</b>		<b>Profession</b>	
<b>Phone</b>	<b>Email</b>	<b>Address</b>	

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Consent to Obtain and/or Release Information
Please specify any information you DO NOT consent to have released /obtained.

Consent to Obtain and/or Release Information
Please specify any people you DO NOT give consent to obtain or release information to:

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## Purpose of collecting and holding information

The information is gathered in order to provide suitable coordination of supports within formal and informal networks within the community and to assist IntroConnect in referring you to more suitable services, where applicable. This information will not be passed on to other third parties except as outlined in this document.

## Confidentiality

All personal information gathered by the IntroConnect will remain confidential and secure except where:

- Failure to disclose the information would place you or another person at serious and imminent risk; or
- De-identified information is used for reporting and statistical purposes; or
- Information is discussed as part of a professional supervision process; or
- Your prior approval has been obtained to:
  - o provide a written report to another professional or agency (e.g., a GP); or
  - o discuss the material with another person, (e.g., a family member, employer, rehabilitation coordinator); or
- There is a legal requirement to disclose, including:
  - o an obligation to disclose the information under the *Commission for Children and Young People Act (2000)*; or
  - o It is subpoenaed by a court; or
  - o If disclosure is otherwise required or authorised by law.

I have been informed and understand how my information will be used, and that this information will not be passed on to other third parties except as outlined in this document. This consent is valid for the duration of an active Service Agreement with us OR unless revoked or changed at any time in writing.

Signature:	Date:	Witness:
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