

PRIVACY AND CONFIDENTIALITY STATEMENT

Screening must be done in privacy and results kept confidential.

The results of the CRAFFT screening will be kept private and confidential and will not become part of the student's record. The completed screening tool will be returned to the student at the end of the screening session.

Parents will be notified if students are referred for a follow-up conversation or intervention.

Conversations with students will remain confidential unless the risk of harm to themselves or others is a concern. For example, we will not disclose specific details relating to possible use with intention to stop or reduce use, or if the risk of harm is low as defined by the CRAFFT.

We will disclose to parents any significant risk for safety, such as driving while impaired without intent to stop, injection drug use or consuming potentially fatal amounts or dangerous combinations of alcohol or drugs. We will also communicate when a sign of alcohol or drug dependency is present.

Please return signed consent forms to your child's Health and Wellness teacher or Student Services by Friday, December 23.

____ I hereby give my consent for my child to participate in the CRAFFT screening that will occur during their health and wellness class.

____ I do not give my consent for my child to participate in the CRAFFT brief screening that will occur during their health and wellness class.

Student's name

Parent's Signature

Date

