**CONSENT AND REFERRAL FORMS**

**Neurodevelopment Assessment Unit**

Cardiff University Centre for Human Developmental Science

School of Psychology

Cardiff, CF10 3AT





 

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Cardiff University Centre for Human Developmental Science

School of Psychology

Cardiff, CF10 3AT

02920 870354

SGO@cardiff.ac.uk

Twitter: @NDAUCardiff

**Expression of Interest Form**

Please complete all sections in full

|  |  |
| --- | --- |
| **Name of parent/carer:** |  |
| **Title:** | **Mr o Mrs o Miss o Ms o Other o** |
| **Relationship to child:** |  |
| **Name of child:** |  |
| **Child’s date of birth:** |  |
| **Child’s gender** | **Female o Male o** |
| **Family contact address:** |  |
| **Family contact email:** |  |
| **Family contact telephone:** |  |

|  |  |
| --- | --- |
| **Name of Referrer** |  |
| **Title:**  | **Mr o Mrs o Miss o Ms o Other o** |
| **Contact address of referrer:** |  |
| **Contact email of referrer:** |  |
| **Contact telephone of referrer:** |  |

**Once complete, please return this form to:**

The Neurodevelopment Assessment Unit

Cardiff University Centre for Human Developmental Science

School of Psychology

Cardiff, CF10 3AT

**Or email this form to:** NDAU@cardiff.ac.uk

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**Overview of Pupil’s Needs**

This sheet is designed for the class teacher and/or ALNCo to complete in order to provide the NDAU staff with a brief summary of the pupil’s needs, the current interventions used and any current assessment information.

|  |  |
| --- | --- |
| **Overview of Presenting Needs** | *Please give a brief summary of the pupil’s presenting needs or areas for development. For example, social, emotional, motor, learning, etc.* |
| **Overview of Interventions**  | *E.g. current approaches with pupil* |
| **Overview of School-Based Assessment Data** | *E.g. baseline assessments, foundation phase profile level, national curriculum levels, literacy levels, Language Link scores etc.* |

**Agency involvement:** Please check school files and record external agency involvement.

|  |  |  |
| --- | --- | --- |
|  | ***Involved?******(Y/N)*** | ***Brief Details*** |
| Behaviour Support Services |  |  |
| **Learning Support Services** |  |  |
| **Child and Family Service / CAMHS** |  |  |
| **Children’s / Social Services** |  |  |
| **Speech & Language Therapy Service**  |  |  |
| **Occupational Therapy** |  |  |
| **Other Health Services** |  |  |
| **Other** (e.g. formal diagnosis, NDT pathway) |  |  |

|  |
| --- |
| **Please ensure that a relevant member of staff completes the Strengths and Difficulties questionnaire (SDQ) as part of the referral pack.** |
| Please also indicate here whether you are happy for the school’s SDQ ratings of the child to be included in the report: |[ ]

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**Referral Pathway Flow Chart**

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**STUDY CONSENT FORM**

(for parents of children aged 4-7 years)

This is to be completed by parents/carers on behalf of their child and themselves.

Please initial box

1. I confirm that I have read and understood the information sheet for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.
2. I understand that my participation and that of my child is voluntary and that I am free to withdraw at any time without giving any reason, without my legal rights being affected.
3. I am happy for the research team to make contact with me if there are any future research studies that might be of interest to me.
4. I agree for my child to perform the developmental assessments as part of the study named above, including measuring my child’s heart-rate.
5. I agree to complete the parental interview and questionnaires as part of the study named above.
6. I understand that relevant sections of my child’s data collected during the study (including my ratings about my child on the Strengths and Difficulties Questionnaire) may be looked at by individuals from the NDAU study team, from regulatory authorities or by my child’s referring agent, where it is relevant to their taking part in this research. I give permission for these individuals to have access to my child’s data.
7. I understand that an assessment report of my child’s strengths and difficulties will be sent to the referring agent to guide their intervention with my child within the school environment. I understand that I do not receive a copy of this report.
8. I understand that a video recording will be made of my child’s assessments for research, safety and training purposes. I understand that brief clips from the video may be used to illustrate important aspects of child development, and to train new researchers, and so such clips may be shown to students or at professional meetings. I give consent for such clips to be taken from this video record, with the understanding that my name or my child’s name will never be associated with the video clip. I understand that the video will remain in the possession of Prof. Van Goozen and the NDAU research team, and will never be given to other unauthorised individuals.
9. I agree that the assessment data can be linked to routinely collected, anonymised datasets (such as those held in the Secure Anonymised Information Linkage [SAIL] databank), in order to answer future questions related to mental health. I understand that the data within any such dataset will be fully anonymised and my child would not be identifiable in any way.

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Name of parent/carer Date Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of person taking consent Date Signature

Cardiff University is the Data Controller and is committed to respecting and protecting your personal data in accordance with your expectations and Data Protection legislation. James Merrifield is the University Data Protection Officer and can be contacted at merrifieldj1@cardiff.ac.uk. Further information about Data Protection, including your rights and details about how to contact the Information Commissioner’s Office should you wish to complain, can be found at the following: <https://www.cardiff.ac.uk/publicinformation/policies-and-procedures/data-protection>

The information on the consent form will be held securely and separately from the research information. Only the researcher will have access to this form and it will be destroyed after 7 years.

The research information you provide will be used for the purposes of research only and will be stored securely. Only members of the NDAU research team will have access to this information. After 7 years the data will be anonymised (any identifying elements removed) and this anonymous information may be kept indefinitely or published.