

Consent and Confidentiality

Consent for SBHC Services

School-based health centers (SBHCs) follow all federal and state laws governing health care and consent for health care services.

Students must be enrolled and provided a consent to care by a parent/guardian to receive the full range of services provided by the SBHC. These include services like well-child exams, sports physicals, care for chronic conditions, and sick care.

Some services provided in a SBHC require additional consents, as they would in any other healthcare setting. These services include, for example:

- Mental health services
- Dental services
- Immunizations

Students may self-consent for sensitive services such as mental health, substance abuse or sexual/reproductive health services, if available in the SBHC, according to [minor consent law in Washington](#)—as they could with any other healthcare provider in the community.

Additional consents may be obtained for urgent or emergency care.

Each SBHC sponsoring agency will have its own protocols and forms for obtaining legal consent for services.

SBHC Enrollment / Registration

In order to inform parents/guardians and students about the SBHC services available, enroll students, and obtain consents, the SBHC sponsor will develop a SBHC registration and information packet that may include:

- How the SBHC collaborates with the school (this could come in the form of a letter from school administration)
- Types of services provided at the SBHC
- SBHC care team qualifications
- Patient's rights and responsibilities
- Student information, including student ID number for patient registration
- Parent/guardian information for patient registration
- Health insurance information for billing purposes
- Health history form
- Consent for services form, including explanation of Washington State's minor consent laws
- FERPA consent form
- Other services consent forms, e.g. oral health screenings, etc.

Consent and Confidentiality

Minimum information for registration. It is helpful for the SBHC to highlight what the *minimum* requirements are for the information that needs to be completed/collected in the SBHC registration package in order to register a student for SBHC services. Parents/guardians may not have the time to fully complete the entire registration packet. They need to be informed about the required information and the optional forms included in the SBHC registration package.

Duration of enrollment. SBHC registration packets can be developed to have a student registered for SBHC services for the entire time that they are enrolled in the school to avoid having parents re-register their student annually. If a SBHC sponsor would like to use this strategy, the SBHC consent to care form needs to explicitly state that the parent is consenting for their student to receive care until they graduate from the school or the parent/guardian rescinds consent via a written letter.

Parent/guardian consent for students to be seen unaccompanied. It is also important that the consent form is explicit about the parent/guardian consenting for their child to be seen without the parent/guardian physically present. SBHC appointments are generally scheduled during the school day for the convenience of students and their families, and the majority of visits, especially with adolescents, will not have a parent/guardian present. This is a key distinction between SBHC visits and primary care visits in the community, where parents often accompany their child to health care appointments.

Translation. Translating the registration packets into the top languages used by families at home in the community will be key for outreach, equitable access to care, and reaching populations potentially most in need of SBHC services.

Electronic signature. It is helpful to have SBHC registration packets and other supplemental consent forms available to complete online through a platform for electronic signatures such as [DocuSign](#).

Release of Information (ROI)

The SBHC sponsor should develop a release of information (ROI) form that aligns with HIPAA guidelines.

General ROI. A general, limited ROI form can be included in the SBHC registration packet and outline that the SBHC is allowed to share basic information with the school such as *“the student is a SBHC patient.”* This can be helpful for attendance issues that may arise, such as when a student is mistakenly marked absent when they were at a SBHC appointment. With that caveat, a more robust ROI form should be developed and tailored to meet specific students’ care coordination needs.

Customizable ROI. A fillable ROI form that allows students and/or parents to consent to sharing specific personal health information with specific school staff for the purposes of care coordination will be valuable. The SBHC provider should explain the benefits of care coordination with the student and/or parent/guardian. The ROI form must outline what type of information the student and/or parent consents to sharing and with whom at the school.

Consent and Confidentiality

Care coordination and student advocacy. Integrated with the school, SBHC providers have the opportunity to get to know their students on a deeper level than a community-based provider. This means they can advocate for the physical, behavioral health, and personal needs of students within the school community. SBHC providers can be invited to share their clinical perspective on students through student intervention team meetings or other care and service coordination strategies utilized by the school. As long as the SBHC provider has the student’s consent to share information in an ROI, they can be a powerful advocate for the student’s needs. This can include needs related to disciplinary actions, school performance, basic needs, and individual rights.

Examples of the types of care coordination information that could be beneficial to share with school staff include: care plan progress, triggers, and techniques that work best for de-escalation. The type of health information that can be shared could be written in to allow the student and/or parent/guardian to stipulate the limits of the information that can be shared. A signed ROI can help both parties work together to improve the health and academic outcomes of a student receiving support services from school staff in addition to health care services through the SBHC.

If a SBHC provider does not have the student’s consent to share information with school staff, then SBHC providers can offer general advice to teachers, counselors, and other school support staff. If a teacher or counselor comes to the SBHC provider to discuss certain circumstances or behaviors related to one student or another, the SBHC provider can offer general advice. Examples include: “in these circumstances that you describe, you could try x,y,z strategies” or “if a student is exhibiting these types of behaviors, it could be beneficial to offer x,y,z services.”

Care coordination between the school and the SBHC also looks like school staff referring students to the SBHC and following up to learn if the student was connected to services. Unless consent is provided by the student to share information, the SBHC provider or coordinator can only share if the referral was received and followed up on; they cannot disclose the services that the student is receiving.

Family Involvement & Communication Protocols

SBHC best practice is to make every effort to involve students’ families in their care. In addition to legal consents, each SBHC will establish their own best practice protocols regarding the appropriate involvement, notification, and communication with parents/guardians. Some common practice examples might include:

- Receiving parent/guardian’s verbal permission for initiating care (after the family enrolls the student and provides written consent for care)
- Re-establishing family contact before re-initiating care in a new school year
- Involving parent/guardian in person or by phone/video in a student appointment or contacting parent/guardian before and/or after SBHC visits, especially for younger students

Consent and Confidentiality

See the [Planning, Operating and Sustaining a SBHC](#) page on the WA SBHA website for more information on HIPAA and FERPA and links to SBHC sponsors' websites (for examples of registration packets including FERPA consents). Webinar recordings and resources on *Consent & Confidentiality in School-Based Health Care* can also be found on the [Webinar & Conference Archive](#) page.

Additional note re SBHCs, minor consent and confidential services

- **Concerns about privacy can prevent adolescents from seeking care.** From both a clinical and a public policy perspective, protection of confidentiality for adolescents, e.g. in [Washington's minor consent laws](#), has been based on recognition that some minors would not seek needed health care, including mental health, substance abuse and sexual/reproductive health care, if they could not receive it confidentially, and that their forgoing care would have negative health implications for them as well as society.
- **Minor consent and confidentiality may be critical for some students to initially seek and access care, which is more likely to happen if care is available at school.** Once in care, many students will be open to and may benefit from parent/guardian involvement, if that involvement is possible for the family and safe for the student.
- **SBHC enrollment and consent.** Again, students must be enrolled by their families to receive the full range of services provided by the SBHC. Students not enrolled in the SBHC by their families may access confidential mental health, substance abuse, or sexual/reproductive health services, if available in the SBHC, according to minor consent law in Washington as they could with any other healthcare provider in the community. SBHC best practice is to make every effort to involve students' families in their care.