# PRIVACY POLICY

This is to inform you what data I am collecting from you and what I intend to do with it.

## What data do I keep and why do I need it?

Name and age – this is basic information that helps me get to know you.

Address, email address, phone number – I use this as a way of contacting you regarding your sessions. I will mainly use the method you first contacted me on but if I cannot reach you, I will try a different method.

**Next of kin/medical professional's details** – If I was worried that you were at risk then I may need to contact your next of kin or medical professional, if I can. I will let you know when/if I am going to do this.

Session notes - I keep brief notes of our session(s), [add in a description of how these are kept].

### Will I share your data and if I do, who will I share it with and for what purpose?

It is very unlikely that I will share your data. I will not sell it on or use it for unethical reasons. I may have to share it if my notes are subpoenaed by court, if you or anyone you tell me about is at harm or risk of harm I may have to pass this information on. I may also discuss your case during supervision but I only use your first name.

#### How will I store your data?

I mainly take notes online, and hardcopies will be immediately, after the work is finished, transferred with your initials to my password protected computer. Your phone number(s) may be kept in my mobile phone with your first name and last initial. Only I will access your information.

#### How long will I store your data for and how will I dispose of it?

I will keep your details and session notes for the time required by my insurer (currently 7).

After this time I will destroy any document with your personal information and delete your phone number out of my mobile phone.

#### Consent

Do you consent to me using your data in this way? Please write  $\ensuremath{\textbf{Yes or No}}$ 

Name of Therapist:

Signature of Therapist: