

Consent for Data Collection

Consent for Data Collection, Processing and Retention South Eastern Physiotherapy Clinic

South Eastern Physiotherapy Clinic collects and processes sensitive, healthcare related personal data on the basis of your explicit consent, and in order to form an opinion about, and to diagnose your presenting condition. Your personal data will not be used for any other purpose

Your data will be processed in a fair manner and retained by South Eastern Physiotherapy Clinic for a period of 7 years after your last attendance. Your data will be stored securely and protected during this time as set out in our Data Protection Policy which is available to you if you wish to have it.

Your personal data may be shared with the person who referred you for physiotherapy, with your family doctor (GP), with a medical consultant or other specialist practitioners. Other examples of people with whom your data may be shared with, subject to your prior agreement, include your Legal Advisors, employers, Insurers, team/club medical staff+ management in order to facilitate your return to normal activities. Your Data will not be shared with any other third party outside of the Clinic without getting you permission to do so.

Your data will not be subjected to automated processing by this clinic.

You have a number of rights in relation to your personal data held at this clinic. These include

- a. the right to request from us access to and rectification or erasure of your personal data,
- b. the right to restrict processing, object to processing as well as in certain circumstances the right to data portability
- c. The right to withdraw your consent for the processing of your data (in certain circumstances) at any time which will not affect the lawfulness of the processing before your consent was withdrawn.
- d. The right to lodge a complaint to the Data Commissioners Office if you believe that we have not complied with the requirements of the GDPR or DPA with regard to your personal data.

The Data Controller and the Data Protection Officer is the Practice Principal: Mr Robby Lodge

I agree to my Personal Data being collected and processed by South Eastern Physiotherapy Clinic.

Patient Name: _____ Date: _____

Guardian / Parent _____ Date: _____

Consent to receive treatment

I agree to receive Physiotherapy treatment from South Eastern Physiotherapy Clinic personnel.

Patient Name: _____ Date: _____

Guardian / Parent _____ Date: _____