



Data Protection Policy and Consent

Under the General Data Protection Policy Regulations (GDPR) – 2018 Data Protection Act, we are required to advise our client(s)/patient(s) on our Privacy Policy, a copy of which can be found on my website - www.wildsoulhealing.co.uk

As part of the Patient Record, Isla Rose Wolf is required to retain information for the purpose of consultation for treatment, recording subsequent treatments, and for use by third party medical practitioners/therapists only, at the request of the patient in writing.

Upon completion of the Consultation and Patient Consent Form, all paper files and information therein may be electronically scanned and stored on computer for as long as the patient remains a patient of the clinic, and thereafter for the statutory period of 7 years for most adults and 7 years for most children. Alternatively, paper records will be retained for the same period as a minimum within a locked filing cabinet. All paper records will be shredded once no longer in use.

All the information provided will be treated as strictly confidential and will not be shared with anyone who does not need access without your written consent. Information will be held both manually and electronically in files accessible only by Isla Rose Wolf, who is directly involved in the data entry and processing of patient records.

I, the undersigned (or undersigned guardian)** acknowledge that I have read Isla Rose Wolf's privacy policy and acknowledge the right for them to process records for the purpose outlined within the policy.

I understand that it is my responsibility to keep appointments or cancel/rearrange them with a minimum of 24 hours notice and I am aware of Isla Wolf's Cancellation Policy - a copy of which is online at www.wildsoulhealing.co.uk

I am happy to receive my courtesy appointment confirmation and appointment reminders by (please tick):

- Both Text message and Email
- Text Message
- Email
- I'd rather not receive appointment reminders thanks

Signature: _____ Date: _____

** For patients under 16 a Parent/Guardian is required to sign.