

CONSENT FORM

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Chil	d's Name:									
Date of Birth:										
Address:										
Pare	ent/Guardian Nam	e								
Tele	phone: (Home)	(Mobile)								
Emo	ail:									
Please tick where you are happy to consent to each of the following: (Please ask your therapy provider for more information if you are unsure)										
	For RRT to collect and process your personal data, to provide occupational therapy treatment to you (see more details in our attached Privacy Information).									
	For RRT to carry o	out the Initial Assessment and follow on Therapy Treatment (if required).								
	For us to share and discuss your information with other professionals, if required (e.g. NHS therapist, other therapists, school etc.).									
	□ (Delete if Not Applicable) For RRT to share reports regarding your therapy intervention with the Sure Start / SENSE Referring Team.									
We may also take photographs / videos – a separate consent form will be provided to you for this. No photographs will be taken without permission.										
	re is no set time un ndraw.	til consent 'expires'. In gen	eral, valid consent remai	ns until you request to						
Signature of Client (or Parent/Guardian)			Print Name							
Dat	e		Relationship to child (if applicable)							



CONSENT FORM - PRIVACY INFORMATION

This privacy information as part of the consent form sets out how Red Robin Therapy uses and protects any personal information that you provide us. Red Robin Therapy is committed to ensuring that your privacy is protected. Should we ask you to provide certain information by which you can be identified when using our services, you can be assured that it will only be used in accordance with this privacy statement.

Why we collect your data:

We collect your personal data because you give us consent to do so, to provide our specialist occupational therapy services to you.

What we collect:

We may collect the following information:

- Information in relation to this consent form;
- Medical, educational, social and lifestyle information, through conversation, observation, standardised assessment and questionnaires;
- Further clinical information in relation to reports from other health professionals (where appropriate).

What we do with the information we gather:

We require this information for:

- Communicating with you about your child's assessment outcomes and/or treatment;
- Professional clinical record keeping of patient information;
- Creating fully informed reports and treatment plans for you;
- Sharing information with relevant health professionals.

Security

We are committed to ensuring that your information is secure. To prevent unauthorised access or disclosure, we have put in place highly secure electronic systems and managerial procedures to safeguard and secure the information we collect.

Controlling your personal information

We will not distribute, sell or lease your personal information to third parties unless we have your explicit permission or are required by law to do so. You may request details of personal information which we hold about you under the General Data Protection Regulation (GDPR). If you would like a copy of the information held on you please contact Clare Canale, Data Controller, at this address: Red Robin Therapy, 18 Allenbrook, Millbrook, Larne, BT40 2QF. Email clare@redrobintherapy.com. If you believe that any information we are holding on you is incorrect or incomplete, please email or write to us as soon as possible at the above address. We will promptly correct any information found to be incorrect.

Data Retention

We will retain your personal data for 7 years after you stop using our services, or 7 years after the age of 18 for a child, unless there is justification for us to retain it for a longer period.

How you can withdraw and request to be deleted from our files

If you do not wish us to make use of your Personal Information in this way, please contact Clare Canale via email. You have the right to withdraw consent.

