



**Paddocks Cottage, Harry Stoke Rd, Stoke Gifford, Bristol, BS34 8Q
07914 933160**

The following agreements may be changed at any time by completing a new form

Patient's name		Date of Birth	
Address		GP Details:	
Telephone	Home:	Mobile:	
E-mail			

How did you find out about Speech Freedom?

Web search Pinterest Facebook helpwithtalking.com

Recommendation/Referred by: _____

Brochure or card from _____ Other _____

Please circle the answers to the following questions, sign and return to me at the above address before your appointment:

I understand that by attending an appointment I am giving consent for therapy.	Yes / No
I consent to my personal data being collected, processed and stored by Speech Freedom, in order to provide their therapy services to me. (See attached Privacy Statement for details)	Yes / No

Have you/your child ever had NHS speech and language therapy?	Yes / No
Are you happy for me to discuss your/your child's therapy with any current or future NHS therapist, or other professional (e.g. doctor, nursery, teacher) and obtain written and/or verbal information from them?	Yes / No
Are you happy for reports to be sent to various professionals involved with you/your child (including NHS Speech and Language Therapy)?	Yes / No
Do you agree to my communicating with you and other professionals via email and/or web-based video/voice/text platforms (e.g. Skype, WhatsApp, Facetime, Google Plus, Facebook Messenger) and accept the risk that this may not be absolutely confidential?	Yes / No
Have you read through my schedule of fees? (see website or brochure)	Yes / No

Private Medical Insurance:

Insurance Claim No. _____ Provider: _____

I understand I am liable for any fees not paid by my provider

If not insured. Do you agree to pay my fees (including travel fees, and report writing) at the end of an appointment, by cash or cheque?	Yes / No
Do you agree to pay the full fee due if you cancel an appointment with less than 24-hours notice, or fail to attend an appointment?	Yes / No

Signed: Date:

Name of parent/guardian: (if applicable)

CONSENT FORM – PRIVACY INFORMATION

This privacy information as part of the consent form sets out how Speech Freedom uses and protects any personal information that you provide us.

Speech Freedom 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, in order to provide our specialist speech and language therapy services to you.

What we collect:

We may collect the following information:

- Information in relation to this consent form;
- Medical and lifestyle information, through conversation, observation and questionnaires;
- Further clinical information in relation to reports from other health professionals.

What we do with the information we gather:

We require this information for the purpose of:

- Communicating with you regarding your 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. In order 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 Susannah Thomson, Data Controller, via email at zannah.thomson@gmail.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 Susannah Thomson via email at zannah.thomson@gmail.com. You have the right to withdraw consent.