



Art Therapy Client Data GDPR Protocol

Art Therapist: Wendy Speed

www.imprintarttherapy.co.uk

imprintarttherapy@gmail.com

The following information regarding the obtaining and storing of Child Client and Parental figures data applies to the intervention of Art Therapy at contracted primary school.

Art Therapy client data GDPR: As from 25th May 2018, under the General Data Protection Regulations (GDPR) I (Wendy Speed, Art Psychotherapist) am required by law to inform you (as my current Art Therapy client, future Art Therapy Client, or contracted organisation) about how I process and keep safe the data I hold that pertains to you. I am also required to gain your consent to my holding and processing your data in certain ways (as detailed below). As an Art Psychotherapist, I take confidentiality and privacy very seriously and am bound by the code of ethics of the British Association of Art Therapists (BAAT) and the Health & Care Professions Council (HCPC).

Referred Child Clients

- Written consent must be given on the provided consent forms to myself or the school's designated Referrer at school, prior to commencement of Art Therapy sessions.
- This must be completed by referred Child Client's Parent or Guardian.
- If Parent/Guardian agrees to consent, both Referrer and myself will keep a copy of consent which is dated and contains Child Client's contact information.

What Client data is held?

I keep certain data so that I can work safely and professionally with the Child Client and their family, in line with the guidelines of BAAT. The Art Therapy client data GDPR I hold may include:

1. The Child Client's and Parent/Guardian's name
2. The Child Client's Parent/Guardian's phone number or email address
3. Relevant medical information
4. Session clinical notes
5. Emails to either Referrer and/or Parent/Guardian
6. End of art therapy reports
7. Child Client's artwork

The Child Client, and Parent/Guardian has the right under GDPR to know what Art Therapy Client data I hold, why I hold it, and how long I hold it. They also have the right to view it, and ask for changes to be made. When sensitive data is to be destroyed, it is shredded. If I discover there has been a breach of data and personal information that could put the Child Client and family at risk, I will undertake to tell the Referrer or Parent/Guardian as soon as possible.

How, why and how long is data held?

With consideration of points in the previous section;

1. The Child Client's and Parent/Guardian's name

How I keep this data

I keep consent forms, referral forms, and clinical notes, which contain names in paper form in a locked cabinet, accessed only by myself.

Why I keep this data

This is required by my professional liability insurer (Howdens) and by my profession organisation (BAAT).

How long I keep this data

My professional liability insurer advises that I keep this data for six years. After that time it is destroyed.

Who sees the data.

Myself. My Professional Supervisor foresees my professional development and competence and will be aware of Clients and cases.

2. The Child Client's Parent/Guardian's phone number or email address

How I keep this data

I will keep contact numbers in a locked cabinet, accessed only by myself. If I need to contact the Parent/Guardian, I will do so on my personal phone, which is locked with a password, using a withheld number. Any email correspondence will be via my work email and will CC school's Referrer. Neither my computer nor my phone are shared with anyone else, unless it is required by a technician for maintenance.

Why I keep this data

This is needed in case I have to contact the Referrer or Parent/Guardian.

How long I keep this data

My professional liability insurer advises that I keep this data for six years. After that time it is destroyed.

Who sees the data.

Myself, as well as the Referrer who completed referral forms and acquired the consent.

3. Relevant medical information

How I keep this data

I keep this data in paper form in a locked filing cabinet, accessed only by myself.

Why I keep this data

It may be relevant to share certain medical information when

(a) The mental health history, diagnoses etc may inform my treatment plan to make it more appropriate.

(b) There is any risk that health conditions (e.g. seizures, diabetes, etc) may impact a session.

(c) Medications may affect the work.

(d) There are any allergies that I should be aware of in order to keep the Child Client safe.

How long I keep this data

My professional liability insurer advises that I keep this data for six years. After that time it is destroyed.

Who sees the data.

Myself, as well as the Referrer (who completed referral forms) and which contains all relevant information.

4. Session clinical notes

Notes include dates and times of attendance, brief notes on themes from the session. I do not keep detailed session notes. I keep a 'clear desk' policy, which means that session notes and other information are not left unattended.

How I keep this data

I keep brief session notes in paper form in a locked cabinet, accessed only by myself.

Why I keep this data

Brief notes may remind me of important points to discuss in our next session, and/or potentially in supervision. Any safeguarding concerns will also be written, and passed onto Referrer to discuss and further act upon.

How long I keep this data

My current policy is to destroy session records six years after work finishes.

Who sees the data

Only myself. However, if any safeguarding concerns warrant further investigation, a copy of these concerns will be passed onto the Referrer.

5. Emails to either Referrer and/or Parent/Guardian

Ideally, all correspondence is through the Referrer, face to face school premises, or via a phone call.

How I keep this data

I may delete emails after I have noted the contents (for example, emails around scheduling). Any emails that I consider it necessary to keep are retained in my Gmail professional account, which is encrypted.

Why I keep this data

I may keep emails if I consider it clinically necessary.

How long I keep this data

I will delete emails when our work ends, unless they form session notes (in which case, see above).

Who sees this data

Only myself, and CC'ed school Referrer.

6. End of art therapy reports

How I keep this data

Written at the end of the termination, reports are initially typed on my laptop. No identifying information of the Child Client is used, only an initial, e.g, Child's name is Wendy, a 'W' will be used throughout the document. Once printed, the child's name, year group, teacher, and child's reflective comment will be handwritten on the document.

Why do I keep this data

It is good practice to consolidate the intervention for the Child, and for Parents/Guardians to acknowledge the intervention has come to an end. The Referrer may now intervene and be able to advise further treatment or another suitable intervention which supports the Child Client.

How long I keep this data

My current policy is to destroy session records six years after work finishes.

Who sees the data

Myself, plus a copy will be sent to Parent/Guardians and Referrer.

7. Child Client's artwork

How I keep this data

Child Client's artwork is kept in an individual folder (where possible). It is encouraged that when sessions come to an end, the Child Client chooses to take artwork home, however they may decide to dispose of it.

Why I keep this data

It is standard practice in Art Therapy for the artworks to be retained by the Art Therapist whilst treatment is ongoing. This is jointly agreed at the beginning stages of therapy and throughout. However, some may be agreed to be taken away at certain times to keep therapy in mind.

How long I keep this data

When our work together ends, the Child Client may decide to take artworks away. If they chose to not take them, I will dispose of them securely.

Who sees the data

Myself and perhaps my Professional Supervisor, if necessary, on rare occasions.

This document regarding Art Therapy Client data GDPR is subject to regular review and will update as I see fit.

Wendy Speed

Date: 01/07/2021

Art Psychotherapist

MA Art Psychotherapy, BA (Hons) Fine Art, HND Health & Social Care

HCPC & BAAT Registered

