

**Privacy Policy (Full Text) & Consent From
Stories of Hands Art Psychotherapy Practice
Practitioner: Marcela Zamborska, MA, PGCert**



Introduction

Stories of Hands Art Psychotherapy Practice, operated by Marcela Zamborska, is committed to protecting your privacy. This policy explains how I collect, store, and process your personal data in compliance with:

- General Data Protection Regulation (GDPR)
- UK Data Protection Act 2018
- British Association of Art Therapists (BAAT) Guidelines on Informed Consent
- Health and Care Professions Council (HCPC) standards

This document also outlines how I manage confidentiality, informed consent, and parental/guardian involvement in therapy for children and young people (CYP).

1. Information I Collect

Parents, Carers, and Guardians

- Full name, contact details, emergency contact information
- Parental responsibility status (especially for separated/divorced parents or Looked After Children)

Children & Young People (CYP) in Therapy

- Full Name, Date of Birth, relevant health and medical history

- Therapy session notes, mental health status, relevant family background
 - GP, school information (if applicable)
 - Signed consent forms (from parent/guardian or CYP where applicable)
 - Information from other professionals involved in the child's care (e.g., schools, SENCOs, social workers, GPs, therapists), with explicit consent
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2. Purpose of Data Collection

Your data is collected for the following reasons:

- To provide safe and effective art psychotherapy services
- To communicate about appointments and therapy progress
- To maintain confidential therapy records
- To comply with legal and safeguarding obligations
- To manage invoices and payments securely (using anonymized reference numbers)

I do not share personal data for marketing purposes. Your data is only used to support the psychotherapy process and necessary communication.

3. Data Collection & Storage Methods

- Direct interactions: Forms, emails, phone calls, therapy sessions
- Third-party sources: With explicit consent, from GPs, schools, social workers
- Email communication: Securely encrypted via Microsoft 365 Business Standard

Secure Data Storage

- Electronic Records: Encrypted and password-protected using Microsoft 365 Business Standard security tools
- No paper records are stored

- Emails: Encrypted, when necessary, documents with passwords sent separately
 - Session Notes: Minimal essential notes, securely stored and shared only when necessary
 - Cloud Storage: Secure and encrypted, access with multifactor authentication
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4. Confidentiality & Information Sharing

Confidentiality is vital to therapy, but some exceptions apply:

1. **Safeguarding concerns** – If a CYP discloses harm to themselves or others, I am legally required to report this.
 2. **Court Orders** – If legally required, information may be disclosed.
 3. **Supervision** – I may discuss anonymized cases with a professional supervisor to ensure best practice.
 4. **With explicit consent**, I may share relevant information with:
 - GPs, schools, social services
 - Other healthcare professionals supporting your child
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5. Informed Consent for Children & Young People

Therapy is most effective when Children and Young People feel safe and have a healthy degree of privacy.

- **Under 16s:** Parental/guardian consent is required. However, if a child demonstrates Gillick Competency, they may provide their own consent.
- **Over 16s:** Presumed to have capacity, in line with Mental Capacity Act 2005, to consent unless legally deemed otherwise.
- **Looked After Children:** Consent must be obtained from the child's social worker, as the state holds legal parental responsibility.

Parental Involvement

- Parents/guardians are encouraged to support their child's therapy. However, I do not share session details without CYP consent, unless there is a risk of harm.
 - Parents will receive general progress updates, focusing on themes rather than specific disclosures.
 - Joint parent-child sessions may be arranged when therapeutically beneficial.
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6. Client Artwork Storage

- Confidentiality: All client artwork is treated as sensitive and confidential material.
- Storage: Artwork is securely stored and will not be shared without consent.
- Digital Artwork: Any photographs of artwork will be encrypted.
- Retention: Client's artwork is returned at the end of therapy or securely destroyed.

6.1 Use of Anonymized Art Materials for Teaching and Research

- Occasionally, anonymized art materials may be used for professional lectures, presentations, journal articles, and research purposes.
 - This information will never be linked to any identified client or their family. Anonymisation ensures that no personal details will be shared or associated with the artwork.
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7. Data Retention & Destruction Policy

- Active clients: Data securely stored for the duration of therapy.
- Adults: Therapy records retained for 8 years after the last session.

- Children and Young People: Therapy records retained until the Children and Young People turn 26 years old.
 - Enquiries (no service provided): Data deleted within 3 months.
 - Secure destruction: All records are permanently erased after the retention period.
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8. Complaint Policy related to Data Protection and Confidentiality

If you have concerns, you may:

1. Raise the issue directly with me via marcela@soh-artpsychotherapy.co.uk
 2. If unresolved, you may contact the Health & Care Professions Council (HCPC):
 - Website: <https://hcpc-uk.org>
 - Phone: 0303 123 1113
 3. For data protection concerns, you may also contact the Information Commissioner's Office (ICO):
 - Website: <https://ico.org.uk>
 - Phone: 0303 123 1113
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9. Data Breach Procedure

In the event of a data breach:

1. Immediate assessment & mitigation of risks will be conducted
 2. Affected clients will be informed
 3. Serious breaches will be reported to the ICO within 72 hours
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10. Website & Cookies

If my website uses cookies, a Cookie Policy will be made available.

11. Policy Updates

This Privacy Policy may be updated periodically. The most recent version will always be available upon request.

Last Updated: 15/03/2025

Consent Form

Stories of Hands Art Psychotherapy

Art Psychotherapist:

Marcela Zamborska, MA, PGCert, HCPC, BAAT



Consent & Permissions Form

Client's Full Name:	
Date of Birth:	

Tick all the options as appropriate

Therapy Consent & Legal Authority

- ☐ I/We are the legal parent(s), carer(s), or guardian(s) of the named child/young person
- ☐ I/We have the legal authority to give consent for art psychotherapy to begin
- ☐ I/We have received written information about the therapy process
- ☐ I/We understand the confidentiality policy and the limits of confidentiality
- ☐ I/We agree to relevant information being shared for safeguarding or clinical collaboration
- ☐ I/We understand that I/We can request access to therapy records if appropriate

Respect for the Child's Therapeutic Privacy

- ☐ Respect my/our child's right to privacy within the therapy process
- ☐ Refrain from requesting details of individual sessions
- ☐ Receive general progress updates and attend joint sessions when clinically appropriate
- ☐ Be informed of any safeguarding concerns or risks to the child's wellbeing

Permissions for Anonymised Use of Artwork

☐ Professional lectures or clinical training

☐ Academic or journal publication

Signatures

By signing below, I/we confirm the above information is true and that I/we give informed consent for the child/young person to begin art therapy.

Include Child's signature if appropriate.

Name	Role	Signature	Date