

THE ELDER ROOTS HOLISTIC HERBALIST

Privacy Notice

Rosemay Herbal, trading as The Elder Roots Holistic Herbalist
Part of The Elder Roots Collective

Practice email: karl@elderroots.co.uk

Primary website: elderroots.co.uk

Additional domains: elderroots.org, elderroots.uk and elderroots.store

ICO registration number: ZA382531

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This notice explains how personal information is collected, used, stored, shared, evaluated and protected.

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Key Privacy Information

The Elder Roots Holistic Herbalist handles health information because it is necessary to assess patients, provide holistic medical herbal care, prepare individual medicines and maintain safe clinical records.

Data controller	Rosemay Herbal, trading as The Elder Roots Holistic Herbalist
Contact	karl@elderroots.co.uk 07498 182614
ICO registration	ZA382531
Clinical records	Paper records in locked storage; electronic records on the encrypted practice laptop with an encrypted weekly backup
Adult record retention	Normally seven years from the last clinical entry
Child record retention	Until age 25, or age 26 where treatment ended at age 17
Zoom consultations	Not recorded by the practice
Marketing	Clinical contact details are not used for a general marketing list; testimonials or public material require separate permission
Appointment diary	Google Calendar with minimum scheduling and continuity information only; it is not the clinical record
Feedback and outcomes	Used for care, quality assurance and service improvement; identifiable public use requires separate consent

Your main rights

You may ask for access to your information, correction of inaccurate information, restriction or objection in certain circumstances, and deletion where no continuing lawful reason requires retention. These rights are not absolute, particularly where a valid clinical record must be retained for safety, accountability or legal claims.

1. About this Privacy Notice

This Privacy Notice explains how The Elder Roots Holistic Herbalist collects, uses, stores, shares and protects personal information. It applies to patients, prospective patients, parents, carers, supporters, representatives, website visitors, people receiving herbal medicines, people giving feedback or testimonial permission, people whose outcome information is used for service evaluation, and people making complaints or data-protection requests.

Health information is particularly sensitive. The practice handles it only where reasonably necessary for safe care, administration, professional accountability, safeguarding, legal compliance or another lawful purpose.

This notice should be read alongside the Patient Terms, Conditions and Practice Policies, relevant consent and intake forms, any individual care-pathway agreement, the Patient Feedback and Testimonial Consent Form, the Patient Outcome and Service Evaluation Log, and the website Cookie Policy where applicable.

2. Who We Are

The data controller is Rosemay Herbal, trading as The Elder Roots Holistic Herbalist, part of The Elder Roots Collective. The business is operated as a partnership.

Address	4 Rathbourne Croft, Parwich, Derbyshire, DE6 1QH
Email	karl@elderroots.co.uk
Telephone	07498 182614
Primary website	elderroots.co.uk
Additional domains	elderroots.org, elderroots.uk and elderroots.store
ICO registration number	ZA382531

Karl Bedson is the principal clinical practitioner and the main contact for privacy and data-protection matters.

3. Contacting Us About Your Information

Questions, requests or complaints about personal information should be sent to Karl Bedson at karl@elderroots.co.uk or to the business address above. Writing "Privacy Request" or "Data Protection Complaint" in the subject line may help the practice identify the request promptly.

The practice may need to confirm a person's identity before disclosing personal information or acting on a rights request. This is to protect records from unauthorised access.

4. Information We Collect

Identity and contact information

- name, title, preferred name and date of birth;
- address, email address and telephone number;
- emergency contact details;
- GP and other healthcare-provider details;
- parent, carer, supporter or representative details where relevant.

Clinical and health information

- presenting concerns, symptoms, medical history and diagnoses;
- previous and current treatment;
- prescribed medicines, over-the-counter medicines, supplements and herbal medicines;
- allergies, sensitivities and adverse reactions;
- pregnancy and breastfeeding information where relevant;

- diet, sleep, exercise, occupation, alcohol, tobacco and relevant substance use;
- mental and emotional wellbeing where clinically relevant;
- test results, medical letters and hospital or GP correspondence;
- consultation notes, clinical observations and assessments;
- treatment plans, prescriptions, dispensing records and follow-up information.
- patient-defined goals and measures of symptoms, function, wellbeing, treatment response and progress;
- adherence, treatment acceptability, adverse effects, completion, discharge, transfer and reasons for changing or ending care.

Clinical information may reveal other sensitive matters, such as disability, racial or ethnic origin, religious belief, sexual health or mental health. Such information is collected only where relevant to safe, appropriate and individualised care.

Administrative and financial information

- appointment, invoice and payment information;
- limited appointment-diary information, including a patient or visit reference, date, time, consultation mode and essential location or continuity details;
- concession eligibility information where relevant;
- cancellation and attendance records;
- delivery, postage and collection information;
- correspondence about consultations, medicines and services.

Payments are made by bank transfer. The practice does not normally receive or retain payment-card details or online banking credentials.

Safeguarding and complaints information

- safeguarding concerns and risks to the patient or another person;
- disclosures of abuse, neglect or exploitation;
- complaints, investigations and related correspondence;
- information shared with insurers, professional advisers or authorities where necessary.

Feedback, outcomes and optional publication information

- private clinical feedback, service-improvement comments and responses to patient-experience questions;
- patient-defined outcomes, treatment-response measures and information used to audit or evaluate the service;
- proposed testimonial wording, naming or anonymity choices, approved publication channels and final wording approval;
- photographs, audio, video, health information, publication history, review dates and withdrawal instructions where separately and expressly agreed.

Private feedback does not become promotional material merely because it is positive. Public use requires a separate, specific permission, and explicit consent is obtained where health or other special-category information is published.

Website and technical information

The public website does not collect complete clinical intake forms or detailed medical histories. Initial intake forms are sent to prospective patients by email and returned through the practice email account.

IONOS website services and SiteAnalytics may process the referring website, requested page or file, browser and operating-system information, device type, time of access and an immediately anonymised internet protocol address. This information is used for statistical evaluation, security and technical optimisation.

5. Where Information Comes From

Most information is provided directly by the patient through email, completed intake and consent documents, consultation, telephone contact, clinical correspondence and medicine or repeat-prescription requests.

Information may also come from:

- a parent or person with parental responsibility;
- an authorised carer, supporter or representative;
- a GP, consultant, pharmacist or other healthcare professional;
- medical letters, reports, test results or hospital discharge information;
- clinical observations made during consultation;
- payment, delivery and administrative records;
- feedback, testimonial-permission and outcome forms completed by the patient or contributor;
- clinical records and governance records used to create defined, proportionate service-evaluation information.
- another person where there is a legitimate safeguarding or serious safety concern.

Where information is obtained from another source, the practice will normally explain this unless doing so would be impossible, unlawful or likely to create a serious risk.

6. Why We Use Information

- to respond to enquiries and assess whether the practice can safely accept a case;
- to distinguish between standard and complex provision and explain likely costs;
- to arrange, confirm and deliver consultations;
- to manage appointment dates, times, consultation modes, home-visit locations and necessary continuity information through the appointment diary;
- to assess health needs and develop or review treatment plans;
- to identify contraindications, interactions and safety concerns;
- to prepare, dispense and deliver individual herbal medicines;
- to communicate about treatment, follow-up, results, medication changes and adverse reactions;
- to manage care pathways, check-ins and repeat prescriptions;
- to monitor patient-defined goals, treatment response, function, wellbeing, adherence, adverse effects and completion of care;
- to receive private feedback, identify themes, audit records, evaluate the service and make proportionate quality and safety improvements;

- to manage optional testimonial, quotation, teaching, image, audio, video or publication permissions, including review and withdrawal.
- to maintain accurate clinical records;
- to issue invoices, record payments and administer cancellations or refunds;
- to manage complaints, safeguarding concerns, legal claims and insurance matters;
- to meet professional, accounting, tax, consumer-law and data-protection obligations;
- to protect the security and integrity of the website, email and practice systems.

The practice does not sell personal information.

7. Lawful Bases for Processing

The practice identifies an appropriate lawful basis for each use of personal information. More than one basis may apply to different parts of the same professional relationship.

Contract - UK GDPR Article 6(1)(b)

Information is used where necessary to take requested steps before entering into a service agreement or to provide an agreed consultation, care pathway, medicine, report or related service. This includes booking and appointment scheduling, payment, cancellation, dispensing, delivery administration and outcome monitoring that forms part of the agreed care.

Legal obligation - Article 6(1)(c)

Information may be used where necessary to comply with legal duties, including tax, accounting, safeguarding, court, consumer-law and data-protection requirements.

Legitimate interests - Article 6(1)(f)

Information may be used where necessary for the legitimate interests of providing safe and orderly services, maintaining accurate records, protecting patients and the public, managing complaints, carrying out proportionate quality assurance and internal service evaluation, preventing misuse, maintaining security and establishing or defending legal claims. These interests are balanced against the person's rights, reasonable expectations and any additional protections required for children or sensitive information.

Consent - Article 6(1)(a)

Consent is used for genuinely optional activities such as anonymous or named testimonials, quotations, identifiable teaching or case material, publication, photography, audio, video or future marketing. Where the material reveals health or other special-category information, the practice obtains an express statement of explicit consent. Consent may be withdrawn for future and controllable use. Withdrawal does not make earlier lawful processing unlawful and does not automatically require deletion of a clinical record retained under another valid basis.

Vital interests - Article 6(1)(d)

In a rare emergency, information may be used or disclosed where necessary to protect a person's life and the person is physically or legally unable to consent.

8. Health and Other Special-Category Information

Health information is special-category personal data. In addition to an Article 6 lawful basis, the practice must have a valid condition under Article 9 of the UK GDPR.

For clinical assessment, treatment, dispensing, routine outcome monitoring, quality assurance connected with care and related recordkeeping, the practice principally relies on Article 9(2)(h), which covers medical diagnosis and the provision or management of health care or treatment, together with the related health or social-care provisions of the Data Protection Act 2018. Clinical information is handled under professional duties of confidentiality.

Other conditions may apply in limited circumstances, including Article 9(2)(a) explicit consent for optional testimonials, publication, identifiable teaching, photographs, audio or video; vital interests in an emergency; legal claims; or an applicable substantial-public-interest condition for safeguarding or prevention of serious harm.

Where identifiable health information is used for an internal service evaluation, the purpose and data required must be defined in advance, access must be restricted and the information must be pseudonymised, aggregated or anonymised when individual identification is no longer necessary. Truly anonymised information is no longer personal information under data-protection law.

9. Children and Young People

Information relating to a child or young person is handled with particular care. Information may be obtained from the child, a parent or person with parental responsibility, an authorised supporter or another healthcare professional.

A child under 16 may make decisions about consultation, treatment and relevant information sharing where Karl assesses the child as Gillick competent. Gillick competence depends on the individual child's maturity and understanding of the particular decision; it is not determined by a fixed minimum age.

Patients aged 16 or 17 are generally presumed capable of making their own decisions unless there is evidence to the contrary. A parent does not automatically have unrestricted access to information disclosed by a Gillick-competent child or a young person who can make the relevant decision.

Information may nevertheless be shared without agreement where necessary because of a serious safeguarding concern, risk of significant harm, urgent healthcare need or legal requirement. Where possible and safe, the child or young person will be told before information is shared.

10. Supported Adults and Representatives

A patient may authorise another person to attend a consultation, assist with communication, receive specified information or help manage appointments and medicines. The scope of that permission will be recorded.

A supporter does not automatically gain access to the patient's full clinical record. Where a patient cannot make a particular decision independently, information will be used and shared in accordance with applicable capacity, best-interest and safeguarding principles. The patient will remain involved as fully as possible.

11. Access Within the Practice

Karl Bedson has access to clinical and administrative records as required to provide and manage care. Heather has limited authorised access where necessary for medicine preparation, packaging and postage, and for appointment scheduling or continuity through the shared Google Calendar. This may include patient or visit references, names where necessary, delivery addresses, appointment times, consultation modes and limited administrative information. She does not require unrestricted access to complete clinical records for these duties.

Access to feedback, testimonial, service-evaluation and outcome records is restricted according to purpose. A person's permission to assist with appointments or medicine delivery does not create authority to inspect those records.

Anyone with authorised access is expected to respect confidentiality and use information only for the purpose for which access was granted.

12. Sharing Information

The practice shares only information that is reasonably necessary for the relevant purpose.

Healthcare professionals

Information may be shared with the patient's GP, consultant, oncology team, pharmacist or another healthcare practitioner. Routine sharing normally takes place with the patient's knowledge or consent.

Parents, carers and representatives

Information may be shared within the limits of the patient's consent, parental responsibility, decision-making arrangements or safeguarding requirements.

Service providers

Limited information may be processed by organisations supporting the practice, including IONOS for website and email services, Zoom for online consultations, Google Calendar for appointment scheduling and continuity, banking providers, postal and courier services, and any accountant, IT support or professional adviser used by the practice. These organisations should receive only the information necessary for their role.

Complaints, insurance and legal advice

Information may be shared with Roisin Reilly where an independent complaint review is required, with Balens Ltd where an insured incident or claim must be notified, and with legal, accounting or professional advisers where reasonably necessary.

Authorities and safeguarding organisations

Information may be shared where necessary with safeguarding services, NHS or emergency services, police, courts, regulators, the Nursing and Midwifery Council, the Information Commissioner's Office or another authority with a lawful right to receive it.

13. Zoom Consultations

Online consultations are provided through Zoom. Zoom consultations are not recorded by the practice. Clinical notes are recorded separately in the patient record.

Patients should use a reasonably private location, avoid insecure public devices where possible, prevent other people from listening unless their presence has been agreed, and tell Karl if another person is present. The practice cannot control the privacy of the patient's own location, device or internet connection.

14. Email, Telephone and Website Enquiries

Email is used for initial enquiries, sending and returning intake or consent documents, booking information, pathway check-ins, clinical correspondence, delivery details, complaints and privacy requests. Full clinical intake forms are not submitted through the public website at launch.

Patients should check that they are using karl@elderroots.co.uk and avoid sending information that is not reasonably needed. Clinical or emergency information should not be sent through social-media messages.

No electronic communication system can be guaranteed to be entirely risk-free. The practice takes proportionate precautions but cannot control the security of a patient's own device, email account or network. Substantive telephone information may be summarised in the clinical record.

Email messages and attachments are processed through the IONOS email service. Relevant clinical information is transferred to the patient record and email is retained only as long as reasonably needed for active correspondence, professional accountability or another stated purpose.

15. Google Calendar and Appointment Scheduling

Google Calendar is used as the practice appointment diary on approved devices accessible to Karl and Heather. It supports scheduling, home-visit and temporary-venue arrangements, and continuity if Karl cannot act. It is not the clinical record and must not become a substitute for the patient file.

Calendar entries are limited to what is reasonably necessary, normally a patient or visit reference, date, time, consultation mode and essential location or safety information. Diagnoses, detailed clinical histories, treatment plans, medicine details, safeguarding information and other unnecessary sensitive content are not entered.

The calendar is not public. Access and sharing are restricted, the Google account must use a unique password and two-step verification before launch, and signed-in devices and permissions are reviewed after a device change or security concern.

Clinically important information arising from cancellation, non-attendance, rescheduling or a safety contact is transferred to the appropriate patient or governance record. Historic calendar information is reviewed and minimised when it is no longer needed for scheduling, continuity, payment reconciliation or another defined purpose.

16. Payments

Payments are currently made by bank transfer. The practice records the payer name, payment date, payment reference, amount, invoice number and any outstanding balance. The patient's bank and the practice bank process the payment under their own privacy arrangements.

The practice does not normally receive complete bank-account credentials, passwords or payment-card information. Financial information is kept separate from clinical detail where practical.

17. Medicine Preparation and Delivery

Information used for dispensing and delivery may include the patient's name, prescribed preparation, dosage directions, safety information required for preparation, delivery address and contact details required by the carrier.

Postal or courier services normally receive delivery information but do not receive the patient's full clinical history. Packaging will be designed to avoid unnecessarily revealing medical information.

18. International Data Transfers

The practice uses external technology providers, including IONOS, Zoom and Google Calendar. IONOS provides website and email services under its data-processing arrangements. Google Calendar processes limited appointment and continuity information under Google's privacy and account terms.

Zoom and Google operate internationally. Information associated with a Zoom consultation or a Google Calendar appointment may therefore be processed in the United States or another country outside the United Kingdom. The providers state that they use recognised contractual, adequacy or other legal safeguards for international transfers where required.

Zoom consultations are not recorded by the practice, clinical histories and notes are maintained separately in the practice record, and Google Calendar contains only minimum scheduling and continuity information. The practice will review this section if another email, website, video, calendar, analytics, backup, booking or cloud-storage service is introduced.

19. Information Security

The practice uses proportionate physical, administrative and technical safeguards, including:

- locked storage for paper clinical records;
- full-device encryption, a strong password and automatic screen locking on the practice laptop;
- access limited to authorised people and restricted according to role and purpose;
- unique passwords and multi-factor or two-step verification for IONOS, Zoom and the Google account before launch;
- checking recipient details before sending information;
- avoiding unnecessary collection, copying or disclosure;
- an encrypted external drive used for at least weekly backup, disconnected and stored separately after use;
- secure destruction of paper records, secure deletion of electronic records and recording of significant access, sharing, publication and withdrawal decisions.

- separate restricted storage for testimonial and publication consent, service-evaluation working files, complaints, safeguarding records, data breaches and practitioner health or capacity records.

Electronic clinical files are stored on the encrypted practice laptop and are not kept in a separate cloud clinical-record system. Clinically important electronic information is copied at least weekly to an encrypted external backup drive and relevant information is printed into the authoritative paper record. Limited appointment information is held separately in Google Calendar. When the laptop is replaced, required records are transferred to the replacement device and the old device is securely wiped before disposal, sale or reuse.

Email is necessarily processed through IONOS, live video through Zoom and limited appointment information through Google Calendar. No system can guarantee absolute security. If a personal-data breach occurs, the practice will contain and investigate it, limit potential harm, record the decision and notify affected people or the ICO where legally required.

20. Retention and Deletion

Adult clinical records

Adult clinical records are normally retained for seven years from the date of the last clinical entry.

Children's clinical records

Records relating to children and young people are retained until the patient's 25th birthday, or until the patient's 26th birthday where treatment ended when the patient was 17.

Enquiries that do not proceed

Where a person does not return the intake form and does not attend a consultation, no clinical patient record is created. Enquiry correspondence and attachments are deleted once it is clear that the person will not proceed, unless there is a complaint, safeguarding concern, legal issue or another specific reason requiring retention.

Google Calendar appointment entries

Calendar entries are kept only while needed for scheduling, continuity, payment reconciliation or another defined operational purpose. Clinically important information is transferred to the patient record. Historic entries are reviewed periodically and unnecessary personal detail is removed or minimised.

Feedback, testimonials and publication consent

Private clinical feedback that forms part of care follows the relevant patient-record retention period. Separate testimonial and publication records are kept while the material remains in use and for as long as reasonably needed to evidence the permission, approved wording, permitted channels, publication history and any withdrawal. After withdrawal, a minimal record may be retained to prevent accidental reuse.

Patient outcomes and service evaluation

Outcome information forming part of clinical care follows the patient-record retention period. Separate identifiable service-evaluation working files are kept only for as long as required for the

defined evaluation and are then securely deleted, pseudonymised, aggregated or anonymised when individual identification is no longer necessary.

Longer retention

Information may be retained beyond the normal period where necessary because of continuing treatment, a complaint, an adverse incident, an insurance matter, a legal claim, safeguarding concerns, a court order or another professional or legal requirement.

Financial and consent records

Invoices and accounting records are retained for the period required by tax and accounting obligations. Other consent records are retained for as long as the related clinical, educational, complaint, publication or service-evaluation material is retained, together with evidence of any withdrawal where necessary.

When information is no longer required, paper records are securely destroyed and electronic records are securely deleted.

21. Automated Decisions

The practice does not use automated decision-making to decide whether a patient is accepted, what assessment applies, what treatment is provided or whether care continues. Clinical and eligibility decisions are made by Karl using professional judgement.

The website may use technical security or spam-detection tools, but these do not make clinical decisions.

22. Your Data-Protection Rights

Depending on the circumstances and the lawful basis used, a person may have the right to:

- be informed about how information is used;
- obtain a copy of their personal information;
- correct inaccurate or incomplete information;
- ask for processing to be restricted;
- object to certain processing;
- request deletion where there is no continuing lawful reason for retention;
- receive certain information in a portable format;
- withdraw consent where processing is based on consent;
- complain about the handling of their information.

These rights are not absolute. For example, the practice may need to retain an accurate clinical record despite an erasure request where retention remains necessary for patient safety, professional accountability, safeguarding, insurance or legal claims. The practice will explain any decision not to comply fully with a request.

23. Accessing Your Records

A person may request a copy of their personal information by contacting karl@elderroots.co.uk. The request does not need to use the phrase “subject access request”, although clearly describing the information wanted may help the practice respond efficiently.

The practice may request proof of identity, clarification of the information requested or evidence that a representative is authorised to act. A response will normally be provided without undue delay and within one calendar month. The period may be extended where the law permits for a particularly complex request, in which case the requester will be informed.

A reasonable fee may be charged only where the law permits, such as for a manifestly unfounded or excessive request or additional copies. Information relating to another person may need to be removed or withheld where disclosure would unfairly affect that person's rights.

24. Correcting Information

Patients should tell the practice if their name, address, contact details, GP, prescribed medicines, pregnancy status, allergies or relevant medical information changes.

A contemporaneous clinical note or professional opinion will not necessarily be deleted merely because the patient disagrees with it. Where appropriate, the record may be supplemented with a correction, updated entry, the patient's own statement or an explanation of the disagreement.

25. Withdrawing Consent

Where the practice relies on consent for an optional activity, including a testimonial, quotation, photograph, audio, video, teaching use or marketing contact, consent may be changed or withdrawn by contacting karl@elderroots.co.uk. Withdrawal applies to future and controllable use. The practice will record the request and take reasonable steps to remove the material from channels under its control.

Withdrawal does not undo processing that was lawful before withdrawal, automatically erase a clinical record, or guarantee removal of copies already downloaded, shared, indexed, cached or republished by other people outside the practice's control. It does not remove the practice's right to retain minimum evidence of the permission, publication and withdrawal, or information required for legal, safeguarding, insurance or professional reasons.

Consent to optional teaching, testimonials or marketing is separate from consent to receive treatment.

26. Complaints to Us and the ICO

A person concerned about how information has been handled should contact Karl Bedson at karl@elderroots.co.uk, 07498 182614 or the business address. The practice will consider the concern fairly and respond under its complaints procedure.

A person may also complain to the Information Commissioner's Office. Complaining to the practice first may allow the matter to be resolved more quickly, but it is not compulsory.

Commissioner's Office	
Telephone	0303 123 1113
Website	ico.org.uk/make-a-complaint

27. Website Analytics and Cookies

The website uses IONOS SiteAnalytics. IONOS states that SiteAnalytics is enabled by default, uses a pixel or server log rather than analytics cookies, anonymises the internet protocol address directly after transmission, does not retain data that identifies individual visitors and uses the information for statistical analysis and technical optimisation.

The website may still use essential technical cookies required for security, navigation or basic operation. If other analytics, embedded media, marketing tools or non-essential cookies are introduced, the Privacy Notice and Cookie Policy will be updated and any legally required cookie choice will be provided.

28. Marketing

The practice does not currently use clinical patient contact details for a general marketing mailing list.

If newsletters or marketing emails are introduced, people will be offered a separate choice, clinical consent will not be treated as marketing consent, consent may be withdrawn at any time and unsubscribing will not affect clinical care. Administrative and clinical messages about an existing booking, prescription, payment or safety matter are not marketing messages. Testimonials, quotations, case material, images, audio and video are used publicly only within the separate permission recorded for that material.

29. Changes to this Notice

This notice may be updated following changes to the business, services, website, Google Calendar or another booking system, patient outcome or service-evaluation activity, testimonial or marketing systems, technology providers, law, ICO guidance, information-sharing arrangements, retention periods or professional requirements.

The current version will be published on elderroots.co.uk. Where a change materially affects existing patients, the practice will take reasonable steps to draw it to their attention.

30. Document Control

Document title	Privacy Notice
Business	Rosemay Herbal, trading as The Elder Roots Holistic Herbalist
ICO registration number	ZA382531
Version	1.1 Approved for publication
Approval date	17 August 2026
Effective date	1 September 2026
Document owner	Karl Bedson
Contact	karl@elderroots.co.uk
Prepared	2 August 2026
Revision summary	Added Google Calendar transparency and controls; patient feedback, testimonial, outcome and service-evaluation information; revised lawful-basis, special-category, security, retention, international-transfer and withdrawal wording.

This Privacy Notice should be reviewed whenever the practice introduces a new website form, analytics product, cloud-storage service, payment platform, video or calendar provider, online booking, marketing or testimonial system, expanded outcome or service-evaluation activity, or another material change in the way personal information is handled.