

Form 2 – For relative/guardian/agent acting on behalf of service user

**ACCESS TO HEALTH RECORDS UNDER THE DATA PROTECTION ACT 1998
(SUBJECT ACCESS REQUEST)**

RELATIVE/GUARDIAN/AGENT ACTING ON BEHALF OF THE SERVICE USER

If you are NOT the service user please state below your full name and relationship to the service user. (This may include a parent/guardian applying for a child’s records)

.....

Your Address

.....

.....

Please state briefly the reason why this application is being made by you

.....

.....

.....

.....

Yours Signature.....

Name in Capitals

Identification

We cannot process your application without proof of identity. Please indicate which of the following identification documents are enclosed

Driving Licence or Passport/Birth Certificate
And additional proof of address e.g utility bill

Please do not forward original documents, as we regret that we cannot assume responsibility for their safety. Photocopies or scans are perfectly acceptable.

IMPORTANT INFORMATION

Under the Data Protection Act 1998 you do not have to give a reason for applying for access to your health records. However, to help us save time and resources, if you wish, it would be helpful if you could use the space provided below to inform us of certain periods and parts of your health record you may require. This may include specific dates, along with details which you may feel have relevance i.e consultant name and location and part of the records you require, for example, written diagnosis or reports.

Example:

1st March 1993 – 31st March 1995 – All correspondence and the consultant letters to my GP within the period.

.....

.....

.....

In order for us to disclose the information the following is required:

The Service User’s Representative Authority Form on the next page must be completed and signed by the service user, or ticked to confirm the request relates to a child under the age of informed consent.

**SERVICE USERS DETAILS AND REPRESENTATIVE AUTHORITY CONSENT FORM
ACCESS TO HEALTH RECORDS UNDER THE DATA PROTECTION ACT 1998**

1. Full name (including former name(s)): (Mr/Mrs/Miss/Ms.....
Name
Former Name(s).....
2. Date of Birth:
3. NHS Number (if known):
4. Current Address:
.....
.....
Tel num: (incl Area Code).....
Email Address:
.....
5. Former addresses (if applicable)
.....

Service users' authority for release of health records.

Under the Data Protection Act 1998 I wish to make a Subject Access Request.

Service User is under the age of informed consent (12)

I give permission for the individual names below to submit this request on my behalf and for all correspondence to be sent to them

Signed (service user):.....

Name of person acting on behalf of the service user.....

Address.....

..... Post code

Relationship to service user

Please return this form with your ID either by email to dpa@nsft.nhs.uk or by post to Compliance Team, Hellesdon Hospital, Kestrel House, Drayton High Road, Norwich, NR5 5BE.

Appendix Form 1, 2 & 3

Access to the Medical Records under the Data Protection Act 1998

Guidance Notes

How do I access my health records/Personal information?

The Data Protection Act 1998, gives every person the right to apply for access to their health records. Any request for access to health records must be made in writing or electronically to the Compliance Team at the Trust.

You can authorise anyone else to apply for access to your health records as your representative. This can include authorising a person access to your records in the future when you are unable to do so due to mental incapacity so that a decision can be made in your best interest.

The Trust is only able to supply copies of health records that they hold. If you require health records relating to care received from another health professional or NHS body then you will need to request this information directly from them.

How long will the request take?

At present we are required by law to respond to the applicant's request within 40 days. The period will commence as soon as we are in receipt of the completed form and identification. We will update you if there are any difficulties in complying with your request within the timescale allowed under the Act.

Can I have copies of all the records?

It is Trust policy to provide an electronic copy of the health record either by encrypted email or encrypted device. The Trust will consider requests for records to be supplied in a paper format on an individual basis if required.

Under the Data Protection Act 1998, there are certain circumstances in which the Trust may withhold information. Access may be denied, or limited, where the information might cause serious harm to the physical or mental health or condition of the service user, or any other person, or where giving access would disclose information relating to or provided by a third person who had not consented to the disclosure.

What if I only want to look at the records?

The Trust does not offer appointments to view records. However, should you need support whilst reading the records provided please contact the Compliance Team who can advise you of the options.

How much does it cost?

The Trust does not charge for the supply of health records, as most records are stored in an electronic format.

Who can I contact if I have any queries?

Email to dpa@nsft.nhs.uk

Compliance Team
Hellesdon Hospital
Kestrel House
Drayton High Road
Norwich
NR5 5BE.

Tel: 01603 421687 or 01603 421108