

Access to Personal Health and Social Care Records Adult Request Form



About this Form

Under the General Data Protection Regulation 2016 and the Data Protection Act 2018 everyone has the right to request access to their health and social care records.

This form is for adults (persons aged 16 or over) who wish to know what personal health and social care information is held about them by the Angus Health and Social Care Partnership and its partners, NHS Tayside and Angus Council, and wish to have access to that information.

If you are under 16 years of age or are a parent of a child aged under 16 years of age wishing to access that child's health and social care records, or If you wish to access personal information in relation to any other Angus Council service please use the general form which is also available on the Angus.gov.uk website.

Verification

We need to make sure we are disclosing your personal information to the right person. We will need to see evidence of your identity. The following documents are acceptable:

- Certificate of Birth, Marriage, or Civil Partnership
- Current Passport
- Current Driving License

You may provide us with photocopies or digital scans of one or more of these documents and include them with your completed form, either by post or by email as attachments.

If you are acting on behalf of a person who lacks capacity we will also need proof of your identity and proof that you have legal power to act on their behalf as their guardian or as having power of attorney for them, or a letter signed by the person you are acting for giving you permission to act on their behalf.

Access to Records

In general, we must provide you with full access to your records. We are required by law to protect the privacy of any other person mentioned in your records (other than health and social care staff involved in your care). When you view or receive a copy of your records any mention of other people will be covered up to protect their privacy.

There are some circumstances which we may not be able to give you access to part or all of your records for legal reasons. If we cannot give you full access to your records, we will write to you and explain our reasons for not disclosing this information.

Your Contact Details

(or the person whose records you wish to access)

First names:	
Surname:	
Address:	
Postcode:	
Phone Number:	
Email Address:	
Date of Birth:	

Details of Agent, Guardian, or Person with Power of Attorney

(where relevant)

First names:	
Surname:	
Address:	
Postcode:	
Phone Number:	
Email Address:	

Current Service User / Patient

It will help us to find your information more quickly if you can tell us whether you are currently receiving any services from us. Please tick any services which you are currently receiving:

- | | | |
|--|---|---|
| <input type="checkbox"/> District nursing | <input type="checkbox"/> Physiotherapy | <input type="checkbox"/> Occupational Therapy |
| <input type="checkbox"/> Social care at home | <input type="checkbox"/> Daycare | <input type="checkbox"/> Respite care |
| <input type="checkbox"/> Care management | <input type="checkbox"/> Attend clinic in Angus | <input type="checkbox"/> Other |

Information Sought

You may only wish to see specific information or records. Please describe the information you wish to see or enter "All" if you wish to access all health and social care information we hold about you.

Reason for Seeking Access

Please explain why you want to access your personal health and social care information. This may help us find the information more quickly.

How we use your Information

The information you provide on this form will only be used to by us to identify any records we hold containing your personal information, and we will only share the information with other organisations for this purpose. We will keep the information securely and will only keep the information you provide on this form for three months after we have provided you with access to your records.

There are also some circumstances under which we may be required by law to process your personal information for other purposes. These purposes include the prevention of fraud, the detection of crime, protecting vulnerable adults, and monitoring our services to make sure do not discriminate against anyone.

Declaration

I declare that, to the best of my knowledge, the information I have provided on this form is accurate and I request:

- Confirmation of the personal health and social care information about the person named in section 1 which is held by Angus Health and Social Care Partnership or its partners
- Access to the personal health and social care records concerning the person named in section 1 which is held by Angus Health and Social Care Partnership or its partners as described in section 4

Signature (Just type your full name if replying by email)		Date
Name in Full:		

Submitting this Form

You can submit this form, along with copies of your verification documents, by mail to:

The Data Protection Officer
Angus Health and Social Care Partnership
Angus House
Orchardbank Business Park
Forfar
DD8 1AN

Or by email, including this form and scans of your verification documents as attachments, to:

AHSCPDataProtection@Angus.gov.uk

What Happens Next

Once we have verified your identity, we will contact you within 30 days to arrange for you to have access to your records.

There is no charge for access to your records. We will also provide you with a single paper or electronic copy of your records free of charge. If you wish multiple copies of your records we will charge you the cost of producing the second and subsequent copies.

Please indicate below how you wish to access your records (you may tick more than one):

- I wish to come to an Angus Health and Social Care Partnership office to view my records and have them explained to me
- I wish someone to come to my home to show me my records and explain them to me
- I wish to receive a paper copy of my records
- I wish to receive an electronic copy of my records (we will normally provide this on a pen drive or CD-ROM)

How to Complain if you are Dissatisfied with our Response

If you are not happy with our decision you may make a complaint to the Information Commissioner in the following ways:

By Mail:
Information Commissioner's Office
Wycliffe House
Water Lane
Wilmslow
Cheshire
SK9 5AF

By Email: casework@ico.org.uk

By Telephone: 0303 123 1113

Online: <https://ico.org.uk/concerns/>

OFFICE USE ONLY

Service	CHI (if Applicable)	Date Received	Date Verified	SAR Ref No.