

**SUBJECT ACCESS REQUEST (HEALTH RECORDS)**

Please read the accompanying Guidance Notes when completing this form, and return it to the Subject Access team at the address given in the notes.

**Patient details**

<b>Title:</b>		<b>Date of birth:</b>	
<b>First name(s):</b>		<b>Surname:</b>	
<b>Address:</b>			
<b>Postcode:</b>		<b>Telephone:</b>	
<b>Hospital number:</b>		<b>NHS number:</b>	

If the patient's name and/or address differ from the above during the period(s) to which the application relates, please give previous details (*continue on a separate sheet if necessary*):

**Applicant details**

If you are applying for access to another person's health records, enter **your** details here. (If you are applying for access to your own records, leave this blank.)

<b>Title:</b>		<b>Relationship:</b>	
<b>First name(s):</b>		<b>Surname:</b>	
<b>Address:</b>			
<b>Postcode:</b>		<b>Telephone:</b>	

## Information requested

You are entitled to a copy of all records which we hold about you, but we may be able to complete your request more quickly if you narrow the scope and focus to particular episodes of care. Please give us **as much detail as possible** to help us find the information you want (*continue on a separate sheet if necessary*). If you wish to receive test results and nursing notes please indicate this.

Dates	Hospital & Department	Name of consultant; any other details of episode

## Authority for access

Tick **ONE** of the following options, and attach copies of the relevant evidence as described in the accompanying guidance notes. Please do not send original documents. **If you do not attach appropriate evidence, we will be unable to process your request.**

	<b>I am the patient.</b> <i>Attach:</i> (1) Photographic proof of identity (eg. passport or driving licence), <b>and</b> (2) Proof of address (eg. recent within 3 months, bank statement or utility bill).
	<b>I am the parent/guardian of the patient, who is too young to understand the request.</b> <i>Attach:</i> (1) Photographic proof of your identity (eg. passport or driving licence), <b>and</b> (2) Proof of address (eg. bank statement or utility bill), <b>and</b> (3) Proof of parental responsibility (eg. full birth certificate, child tax credit, etc.)
	<b>I have authority to act on behalf of the patient.</b> ( <i>Not applicable if patient is deceased.</i> ) <i>Attach:</i> Written consent from the patient, <b>or</b> power of attorney for health & welfare.
	<b>I am the deceased's patient personal representative.</b> <i>Attach:</i> <b>Any of:</b> Copy of the will naming you as executor, solicitor's letter granting executor status, grant of probate, or letters of administration.
	<b>I have a claim arising from the death of the patient.</b> <i>Attach:</i> An explanation of how the health records are relevant to that claim.

## Declaration

"I declare that the information I have provided is correct to the best of my knowledge."

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## SUBJECT ACCESS REQUEST (HEALTH RECORDS) – GUIDANCE NOTES

### Rights of access

The General Data Protection Regulation (GDPR) and the Data Protection Act 2018 give individuals (“Data Subjects”) rights to access information held about them held by organisations (“Data Controllers”). GDPR places obligations on data controllers to handle and manage information in a specific way. GDPR relates specifically to information relating to living individuals.

The Access to Health Records Act 1990 deals with disclosure of deceased persons’ health records. Under the Access to Health Records Act 1990, the health records of deceased patients may be accessed only by the patient’s personal representative (the executor of the will, or a person granted probate or letters of administration), or by any person with a claim arising from the death. We will ask for evidence of one of these, but will otherwise normally handle the application as if it were a subject access request.

Family members and next of kin have no automatic right of access to records, even after a patient’s death. Power of attorney also ends at death.

If you are applying for a copy of health records for any non-medical purpose, with the patient’s written consent, we will normally handle the application as if it were a subject access request.

### What you need to provide

You must provide written evidence of identity and, if you are not the patient, appropriate lawful authority to act on the patient’s behalf. The application form lists the evidence which is needed for each type of application.

If you are the parent/guardian of a child and are making an application on their behalf, please note that you can only act without their consent until they are old enough to understand the nature of the request for themselves. We therefore normally ask for the child’s consent if they are 12 years of age or over – see our Confidentiality & Data Protection Policy for more details.

### What you can expect from us

**The majority of our records are now held in an electronic form.** These records will be burnt on to a CD unless you specify that you would like them in another format. The 7 zip program will be required to access the records. We are not at this time able to provide electronic copies of records held in a paper form.

Information will normally be provided free of charge. Although a reasonable fee for administrative costs may be charged if a request is manifestly excessive.

We will respond to your request with **the statutory calendar month** upon receipt of valid proof that you have the legitimate rights to access data. If we are having a difficulty meeting this timeframe we may extend by a maximum of two calendar months. We will notify you before the end of one calendar month if an extension is required and the reason for this.

## Further information

You can contact the team between 8am and 4pm, Monday to Friday (excluding public holidays):

**Address:** Subject Access Team  
Medical Records  
Ashford Hospital  
London Road  
Ashford  
Middlesex TW15 3AA

**Tel:** 01784 884773

**Email:** [asp-tr.sar@nhs.net](mailto:asp-tr.sar@nhs.net)

Please do not attend in person unless you have made a prior appointment to collect your records, as it is otherwise unlikely that the team will be able to meet you.

If you would like more information on how the Trust handles subject access requests, please contact the team or see our website:

**<http://www.ashfordstpeters.nhs.uk/access-to-health-records>**

### Privacy Notice

Ashford & St Peter's Hospitals NHS Foundation Trust will hold and use the information you provide on this form in order to process your subject access request. It will not be used for any other purpose. In line with NHS Records Management guidelines, all information relating to subject access requests is normally kept for three years after the request is completed. At the end of the retention period information will be destroyed in a secure and confidential manner.

If the request is being made in connection with a potential complaint or legal claim against the Trust arising from treatment then we may refer to our Legal Services Team.