Email- accesshealthrecords@jpaget.nhs.uk

Telephone- 01493 452153



# **Patient Representative Subject Access Request Information Sheet**

# **SECTION 1**

It is the responsibility of the requester to ensure the email address supplied on the form is not shared, as this will be used to send information on the progress of the request and also used to send password(s).

If you provide us with a shared email address, please be aware these will be used for sending a password and link to access encrypted confidential files.

#### **SECTION 2**

Fertility records are shared, if these are required you need to contact us and ask for a 'Fertility Consent Form'. You will need to complete the 'Patient Representative Access Form' alongside this.

### **SECTION 3**

The format that you will receive your health records will depend on the size of the file. The average file size we are currently able to send is 15mb or 50 pages, but this may vary.

The format that you will receive your radiology images will be by an electronic link and will be accessible via a Windows pc/tablet only. Unfortunately: this link cannot be opened from a mobile phone or Mac products.

We will need an email address and mobile number to send the link and password separately. You will have 30 days to access this link. If you are unable to provide a mobile number then please provide us with 2 different email addresses. If you provide us with shared email addresses, please be aware these will be used for sending a password and link to access encrypted confidential files.

Alternatively; a disc may be supplied or paper copies. Paper copies are not of a diagnostic quality and are not a suitable copy for a clinical diagnosis of a medical condition.

If you require the records to be posted this will done free of charge.

If you wish to make an appointment to view the health records, please be aware that we cannot discuss the contents or comment on anything held within the health record as we are not medically trained. If you require guidance based on

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information held within the health record you would need to contact the Patient Advice & Liaison Service via email: pals@jpaget.nhs.uk

Our availability times to view health records are as follows:

Monday to Friday 10am to 3pm

#### **SECTION 4**

If you are unable to provide copies of I.D. then please contact us for advice.

#### **SECTION 5**

In all cases the requester provides proof of their name and address. The requester must all also include one of the following:

#### Patients under 13:

 Birth certificate (showing parentage) and/or proof of their relationship to the child

#### Adults lacking capacity:

- A power of attorney (must be registered with the Court of Protection)
- A copy of the court appointed deputy document

If you are not able to provide proof of eligibility, then please provide in writing the reason why the applicant is requesting this information. This can be sent via post or email. A decision will be made on a case by case basis on what records can be disclosed, if any.

### Who has parental responsibility?

Mothers automatically have parental responsibility (unless specified otherwise by a Court) and will not lose it if divorced. Married fathers automatically have parental responsibility and will not lose it if divorced. Unmarried fathers do not automatically have parental responsibility unless named on the birth certificate.

#### Who else can have Parental Responsibility?

Parental responsibility is not automatically granted to people who are not parents. Even if they care for and are responsible for the child on a day to day basis. There are several ways that a person who is not the child's parent may obtain parental responsibility for the child.

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If relevant, we will require proof of one of the following:

- A copy of the resident order from the court proving the appointment of guardianship due to deceased parents.
- A copy of proof of the child's special guardianship
- A copy of the adoption papers

### **SECTION 6**

We can only accept electronic signatures, if you do not have an electronic signature, please print the form off to sign.

### PRIVATE PATIENT RECORDS

We are unable to supply records for treatment received at this hospital privately. If you require private patient records, please contact the Consultant's private secretary.

### **GENERAL INFORMATION**

The Data Protection Act 2018 applies to patient information held relating to live patients. The Access to Health Records Act 1990 applies to deceased patients. Patient information is defined as records held both on a computer system and in a manual filing system. Under these Acts, a patient is entitled to access their own information or other patients. This is providing the consent or authorisation is valid and copies of acceptable I.D have been supplied or visually inspected. The Acts give rights of access, information may be withheld if the clinician feels that release of information may cause serious mental or physical harm to the requester. Information relating to a third party (another patient) will automatically be withheld unless we have specific consent.

Children and their right to consent

Article 8 of the 2018 UK General Data Protection Regulation (GDPR) requires verified parental consent for under 13yrs (13yrs, in the UK). Accordingly, the Trust, as Data Controller (Caldicott Guardian), on receipt of a subject access request on behalf of a child will need to judge whether the child understands the nature of the request. If the child understands, they are entitled to exercise the right and the Data Controller should reply to the child. If the child does not understand the nature of the request, someone with parental responsibility for the child is entitled to make the request on behalf of the child.

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## **HOW TO RETURN THE FORM AND RELEVANT COPIES**

You can return the form and relevant copies via post or email. If emailing we can accept photo's (providing they are clear), scanned copies or electronic copies (see 'Section 6' of the information sheet for guidance). Alternatively you can personally return the form to the Main Reception Desk at the front of the Hospital. Please ensure it is returned in a clearly marked envelope addressed to the 'Access Team, Health Records Department'.

### PROCESSING YOUR FORM AND RELEVANT COPIES

When we have received the form and relevant copies, we will check these are valid. If they are valid we have 30 days to complete the request. If they are not valid we will be in contact.

Please be aware your subject access request will only cover the period up to the request date. If any additional information is required after this date, a new subject access request will need to be submitted.

#### **CHARGES**

This service, including postage, is provided free of charge.

However, a "reasonable fee" will be charged for further copies of the same information and when a request is manifestly unfounded or excessive, particularly if it is repetitive. The fee will be based on the administrative cost of providing the information.

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