# Consent form (Releasing health records under the Data Protection Act 1998)

## **About this form**

In order to proceed with your claim, your solicitor may need to see your health records. Solicitors usually need to see all your records as they need to assess which parts are relevant to your case. (Past medical history is often relevant to a claim for compensation.) Also, if your claim goes ahead, the person you are making the claim against will ask for copies of important documents. Under court rules, they may see all your health records. So your solicitor needs to be familiar with all your records.

| Part a – your, the health  | n professio                          | nals' and yo   | ur solicito   | r's or age     | nt's deta   | nils           |             |              |
|--|--------------------------------------|----------------|---------------|----------------|-------------|----------------|-------------|--------------|
| Your full name:  |                                      |                |               |                |             |                |             |              |
| Your address:  |                                      |                |               |                |             |                |             |              |
| Date of birth:   |                                      |                |               |                |             |                |             |              |
| Date of incident:  |                                      |                |               |                |             |                |             |              |
| Solicitor's or agent's name address:   |                                      |                |               |                |             |                |             |              |
| GP's name and address (a number if known):   | and phone                            |                |               |                |             |                |             |              |
| Name (and address if known hospitals you went to in relative this incident:  | ,                                    |                |               |                |             |                |             |              |
| If you have seen any other organisation about your inj example, a physiotherapis had any investigations (for x-rays) please provide deta | uries (for<br>t) or have<br>example, |                |               |                |             |                |             |              |
| Part b – your declaratio   | n and signa                          | ature          |               |                |             |                |             |              |
| Please see the 'Notes for t  | he client' ov                        | er the page b  | efore you s   | ign this forn  | n.          |                |             |              |
| To health professionals  | i                                    |                |               |                |             |                |             |              |
| I understand that filling in hospital records relating to  |                                      |                |               |                |             |                | GP recor    | ds, and any  |
| Please give my solicitor or days.  | agent copie                          | s of my health | n records, ir | n line with th | ne Data F   | Protection Act | t 1998, wit | hin 40       |
| Your signature:  |                                      |                |               |                |             | Date:          | /           | /            |
| Part c – your solicitor's  | or agent's                           | declaration    | and signa     | ture           |             |                |             |              |
| Please see the 'Notes for t  | the solicitor of                     | or agent' over | the page b    | efore you s    | ign this fo | orm.           |             |              |
| To health professionals  | ;                                    |                |               |                |             |                |             |              |
| I have told my client the i records in this case. I end  |                                      |                |               |                |             | cords. I confi | rm that I r | eed the full |
| Solicitor's or agent's signature:  |                                      |                |               |                |             | Date:          | /           | 1            |

#### Notes for the client

Your health records contain information from almost all consultations you have had with health professionals. The information they contain usually includes:

- why you saw a health professional;
- · details of clinical findings and diagnoses;
- any options for care and treatment the health professional discussed with you;
- the decisions made about your care and treatment, including evidence that you agreed; and
- details of action health professionals have taken and the outcomes.

By signing this form, you are agreeing to the health professional or hospital named on this form releasing copies of your health records to your solicitor or agent. During the process your records may be seen by people who are not health professionals, but they will keep the information confidential.

If you are making, or considering making, a legal claim against someone, your solicitor will need to see copies of all your GP records, and any hospital records made in connection with this incident, so he or she can see if there is anything in your records that may affect your claim. Once you start your claim, the court can order you to give copies of your health records to the solicitor of the person you are making a claim against so he or she can see if any of the information in your records can be used to defend his or her client.

If you decide to go ahead with your claim, your records may be passed to a number of people including:

- the expert who your solicitor or agent instructs to produce a medical report as evidence for the case;
- the person you are making a claim against and their solicitors;
- the insurance company for the person you are making a claim against;
- any insurance company or other organisation paying your legal costs; and
- any other person or company officially involved with the claim.

You do not have to give permission for your health records to be released but if you don't, the court may not let you go ahead with your claim and, in some circumstances, your solicitor may refuse to represent you.

If there is very sensitive information in the records, that is not connected to the claim, you should tell your solicitor. They will then consider whether this information needs to be revealed.

## Notes for the solicitor or agent

Before you ask your client to fill in and sign this form you should explain that this will involve his or her full health records being released and how the information in them may be used. You should also tell your client to read the notes above.

If your client is not capable of giving his or her permission in this form, this form should be signed by:

- your client's litigation friend;
- someone who has enduring power of attorney to act for your client; or
- your client's receiver appointed by the Court of Protection.

When you send this form to the appropriate records controller please also enclose the authorised fees for getting access to records.

If you find out at any stage that the medical records contain information that the client does not know about (for example, being diagnosed with a serious illness), you should discuss this with the health professional who provided the records.

Unless your client agrees otherwise, you must use his or her health records only for the purpose for which the client signed this form (that is, making his or her claim). Under the Data Protection Act you have responsibilities relating to sensitive information. The entire health record should not be automatically revealed without the client's permission and you should not keep health records for any longer than you need them. You should return them to the client at the end of the claim if they want them. Otherwise, you are responsible for destroying them.

#### Notes for the medical records controller

This form shows your patient's permission for you to give copies of his or her full GP record, and any hospital records relating to this incident, to his or her solicitor or agent. You must give the solicitor or agent copies of these health records unless any of the exemptions set out in The Data Protection (Subject Access Modification) (Health) Order 2000 apply. The main exemptions are that you must not release information that:

- is likely to cause serious physical or mental harm to the patient or another person; or
- relates to someone who would normally need to give their permission (where that person is not a health professional who has cared for the patient).

Your patient's permission for you to release information is valid only if that patient understands the consequences of his or her records being released, and how the information will be used. The solicitor or agent named on this form must explain these issues to the patient. If you have any doubt about whether this has happened, contact the solicitor or agent, or your patient.

If your patient is not capable of giving his or her permission, this form should be signed by:

- a 'litigation friend' acting for your patient;
- someone with 'enduring power of attorney' to act for your patient; or
- a receiver appointed by the Court of Protection.

You may charge the usual fees authorised under the Data Protection Act for providing the records.

The BMA publishes detailed advice for doctors on giving access to health records, including the fees that you may charge. You can view that advice by visiting

https://www.bma.org.uk/advice/employment/ethics.

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