

CARE DATA - OPT OUT FORM

NHS England's care.data system aims to provide timely, accurate information to citizens, clinicians and commissioners about the treatments and care provided by the NHS.

Please refer to the NHS England's care.data patient information leaflet before completing this form, a copy of this is available on our website: www.stjohnssurgerybromsgrove.nhs.uk

- (A) I, **DO NOT** want my GP to release any of my GP record to:
Health & Social Care Information Centre for purposes of the care.data system
- (B) I, **DO NOT** want the Health & Social Care Information Centre to disclose to any accredited third parties, any information they hold on me (from any NHS source)
Note: In general, such data would only be made available to accredited third parties in anonymised, pseudonymised or aggregated form

Please complete in BLOCK CAPITALS

Title _____ Surname _____ Forename(s) _____

Date of Birth _____

Address _____

Postcode _____

Phone _____

Mobile _____

Signature _____

Date _____

If you would like to fill out this form on behalf of *another person* such as a child, the GP Practice will consider the request. Please fill out their details above and your details below:

Your Name (in full) _____

Your Signature _____

Relationship to Patient _____

Date _____

RETURN COMPLETED FORM TO YOUR GP PRACTICE

FOR NHS STAFF USE: (A) 9Nu0 (B) 9Nu4

Patient record updated Date _____