

# PARSONS HEATH MEDICAL PRACTICE OPT OUT OF SHARING PERSONAL CONFIDENTIAL DATA

## Opting out of sharing your Personal Confidential Data

### Introduction

Information about you and the care you receive is shared, in a secure system, by healthcare staff to support your treatment and care. It is important that we, the NHS, can use this information to plan and improve services for all patients. We would like to link information from all the different places where you receive care, such as your GP, hospital and community service, to help us provide a full picture. This will allow us to compare the care you received in one area against the care you received in another, so we can see what has worked best.

Information such as your postcode and NHS number, but not your name, will be used to link your records in a secure system, so your identity is protected. Information which does not reveal your identity can then be used by others, such as researchers and those planning health services, to make sure we provide the best care possible for everyone. How your information is used and shared is controlled by law and strict rules are in place to protect your privacy.

We need to make sure that you know this is happening and the choices you have.

### Do I have a choice?

**Yes.** You have the right to prevent confidential information about you from being shared or used for any purpose other than providing your care, except in special circumstances. If you do not want information that identifies you to be shared outside your GP practice, ask your practice to make a note of this in your medical record. This will prevent your confidential information being used other than where necessary by law, (for example, if there is a public health emergency).

You will also be able to restrict the use of information held by other places you receive care, such as hospitals and community services. You should let your GP know if you want to restrict the use of this information.

Your choice will not affect the care you receive.

### Do I need to do anything?

If you do not want your information to be shared please sign the form below:-

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I wish to opt out of sharing my Personal Confidential Data

Name: ..... D.O.B .....

Address: .....

PARSONS HEATH MEDICAL PRACTICE  
OPT OUT OF SHARING PERSONAL CONFIDENTIAL DATA

Signature:.....