



Choose if data from your health records is shared for research and planning

# Manage another person's choice on their behalf

Use this form to make a choice for another person who cannot manage their choice themselves.

To complete this form on behalf of another person you must be one of the following to the person:

- Health and welfare lasting power of attorney
- Property and financial affairs lasting power of attorney
- Court of Protection deputy

Further details about how the NHS uses health data can be found online at:

[www.nhs.uk/your-nhs-data-matters](http://www.nhs.uk/your-nhs-data-matters)

**Once completed you can either email or post this form.**

**To email this form to our NHS Digital Contact Centre please use:**  
enquiries@nhsdigital.nhs.uk

**To post the form please send to:**  
National Data Opt Out Contact Centre  
NHS England  
Freepost  
PO Box 16738  
Redditch  
B97 9PT



## Section 3

### Tell us the person's name and which photocopy you're sending

Do not fill in this section if you know the person's NHS number.

If you cannot provide the person's NHS number, you need to provide a photocopy of one of the following:

- their passport
- their driving licence (full or provisional)
- their birth certificate
- their marriage certificate

#### Only send us photocopies

Do not send us your original documents.

#### Full name

#### Photocopy provided

Please tick only one option

- Passport (photo page only)
- Driving licence (full or provisional)
- Birth certificate
- Marriage certificate

## Section 4

### Your details

#### Full name

#### Address

This must be your address you have registered with your GP surgery.

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|----------|--|
|          |  |
|          |  |
|          |  |
|          |  |
| Postcode |  |

## Section 5

### Do you have your NHS number?

An NHS number is a 10 digit number.

You can find your NHS number on your:

- prescriptions
- test results
- appointment letters
- referral letters

**Yes, my NHS number is:**

|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|

**No, I do not have my NHS number**

If no, go to section 6 and provide a photocopy to prove your name and address

## Section 6

### Tell us which photocopies you are sending to prove your name and address

Do not fill in this section if you know your NHS number.

If you cannot provide your NHS number, you need to provide photocopies to prove your:

- name
- address

#### Only send us photocopies

Do not send us your original documents.

#### Photocopy provided to prove your name

Please tick only one option

- UK driving license (full or provisional)
- Passport (photo page only)
- Birth certificate
- Marriage certificate

#### Photocopy provided to prove your address

Your proof of address must be:

- the same as the address you gave in section 4
- no more than 12 months old

Please tick only one option

- Utility bill (gas, electric or phone bill)
- Bank or credit card statement
- Mortgage statement
- Council tax bill or letter
- Payslip or P60

## Section 7

### Tell us which photocopy you are sending to prove you can make a choice on behalf of the person

Please tick only one option

- Health and welfare lasting power of attorney
- Property and financial affairs lasting power of attorney
- Court of Protection order naming you as deputy

## Section 8

### Tell us your choice

The choice you are making is whether the person's confidential patient information can be used for:

- research to find cures and better treatments for illnesses
- planning where we need to improve or provide more health services

This decision will not affect the person's individual care. You can change their choice at any time as long as you can make a choice on their behalf.

### I allow the person's confidential patient information to be used for research and planning

- Yes**, I allow the person's confidential patient information to be used for research and planning
- No**, I do not allow the person's confidential patient information to be used for research and planning

## Section 9

If you would like confirmation of your choice please provide your email address in the box below. Postal confirmation is not available at present.

Email address:

## Section 10

### Your declaration

I confirm that:

- the information I have given in this form is correct
- I can make a choice on behalf of the person

### Signature

### Date signed

Go to the next page to find out where to send your form.

## Where to send your form

Please send your form and any photocopies to one of the following:

Email :

enquiries@nhsdigital.nhs.uk

Post :

National Data Opt Out Contact Centre

NHS England

Freepost

PO Box 16738

Redditch

B97 9PT

**Only send us photocopies**

Do not send us your original documents.

## What happens next

It can take up to 14 days to process your form once we've got it.

Once we've processed your form we will send you confirmation of your choice. It can take up to 21 days for your choice to apply to future data releases leaving the NHS.

We will keep this form for a minimum 3 months in case of any errors or queries.

For more information please read our privacy notice on our website

[your-data-matters.service.nhs.uk/privacy-notice](https://your-data-matters.service.nhs.uk/privacy-notice)