

Dear patient,

NHS Digital has been directed to collect, process, analyse and disseminate general practice data to support the purposes set out in the [GP Data for Planning and Research Direction 2021](#). This is a national initiative and from July 1st, 2021, patient data will be extracted from GP systems on a daily basis; data will be encrypted in transit and pseudonymised.

As this is a statutory obligation, practices are legally obliged to share this data, unless patients have opted out of having their data shared. If you as patient want to opt out of your data being shared, apart from information used for your direct care, you have the option of registering a [Type 1 Opt-out](#) or a [National Data Opt-out](#), or both.

If you wish to register your opt out choice, please use the following link:

<https://www.nhs.uk/your-nhs-data-matters/manage-your-choice/>

You can also complete the attached form and give it to your GP practice staff.

## **Register your Type 1 Opt-out preference**

The data held in your GP medical records is shared with other healthcare professionals for the purposes of your individual care. It is also shared with other organisations to support health and care planning and research.

If you do not want your personally identifiable patient data to be shared outside of your GP practice for purposes except your own care, you can register an opt-out with your GP practice. This is known as a Type 1 Opt-out.

Type 1 Opt-outs may be discontinued in the future. If this happens then they may be turned into a National Data Opt-out. Your GP practice will tell you if this is going to happen and if you need to do anything. More information about the National Data Opt-out is here: <https://www.nhs.uk/your-nhs-data-matters/>

You can use this form to:

- register a Type 1 Opt-out, for yourself or for a dependent (if you are the parent or legal guardian of the patient) (to **Opt-out**)
- withdraw an existing Type 1 Opt-out, for yourself or a dependent (if you are the parent or legal guardian of the patient) if you have changed your preference (**Opt-in**)

This decision will not affect individual care and you can change your choice at any time, using this form. This form, once completed, should be sent to your GP practice by email or post.

### **Details of the patient**

|                              |  |
|------------------------------|--|
| <b>Title</b>                 |  |
| <b>Forename(s)</b>           |  |
| <b>Surname</b>               |  |
| <b>Address</b>               |  |
| <b>Phone number</b>          |  |
| <b>Date of birth</b>         |  |
| <b>NHS number (if known)</b> |  |

## **Register your Type 1 Opt-out preference**

### **Details of parent or legal guardian**

If you are filling in this form on behalf of a dependent e.g. a child, the GP practice will first check that you have the authority to do so. Please complete the details below:

|                                |  |
|--------------------------------|--|
| <b>Name</b>                    |  |
| <b>Address</b>                 |  |
| <b>Relationship to patient</b> |  |

### **Your decision**

Opt-out

I do not allow my identifiable patient data to be shared outside of the GP practice for purposes except my own care.

OR

I do not allow the patient above's identifiable patient data to be shared outside of the GP practice for purposes except their own care.

Withdraw Opt-out (Opt-in)

I do allow my identifiable patient data to be shared outside of the GP practice for purposes beyond my own care.

OR

I do allow the patient above's identifiable patient data to be shared outside of the GP practice for purposes beyond their own care.

### **Your declaration**

I confirm that:

- the information I have given in this form is correct
- I am the parent or legal guardian of the dependent person I am making a choice for set out above (if applicable)

Signature

Date signed

**When complete, please post or send by email to your GP practice**

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For GP Practice Use Only

|                                  |   |  |
|----------------------------------|---|--|
| <b>Date received</b>             |   |  |
| <b>Date applied</b>              |   |  |
| Tick to select the codes applied | <b>Opt – Out - Dissent code:</b><br>9Nu0 (827241000000103  Dissent from secondary use of general practitioner patient identifiable data (finding))                    |  |
|                                  | <b>Opt – In - Dissent withdrawal code:</b><br>9Nu1 (827261000000102  Dissent withdrawn for secondary use of general practitioner patient identifiable data (finding)) |  |