

Staff use:

SAR System reference:



Subject Access Request (SAR)

Request for Personal Health Records

Section 01 – ‘Data Subject’ or ‘Applicants’ Details (mandatory)

(If you are requesting information on behalf of another i.e. you are their representative fill in [Section 01](#) with their details, if it is children’s records also fill in [Section 03](#)).

This request is for ‘personal data’ held by Manx Care.

It is recommended that you use this form when making your request as it is designed to capture all the information required.

Please read all the Subject Access Request Guidance Notes at the back of this form.

Please complete this form in capital letters using black ink.

Title (please circle one):	Mr Mrs Miss Ms Other (please state):
Family Name / Surname:	
First Names(s):	
Current address:	
	Postcode:
Contact telephone number(s)	
Email address:	
Date of Birth:	<div></div> <div>Please provide proof of identity - see guidance notes at the end of this form.</div>

Children’s Records:

Please note if you are requesting your child’s records you will have to provide proof of parental responsibility. [You must also complete Section 03 of this form.](#)

Section 02 - Details of information required (mandatory)

Please note that Manx Care does not hold personal information indefinitely. It may be that some information has been destroyed in line with our Records Retention Policies.

Please note: We may not release information provided by third parties without their permission.

Requesting your GP (General Practitioner) records:

These must be requested directly with the GP Surgery as Manx Care does not hold them unless the person is deceased.

Nobles Records required for a consultation:

Business as usual requests are when for example, your consultant (who can be at another hospital outside of the Isle of Man) requires an X-ray you have previously had taken. Your consultant will make the request directly to Nobles; there is no need for you to complete this application form.

Making your request:

Please describe the information you want in the **“My request box”** and tick the area(s) your records are held. We may need to contact you if your request is not clear and this will delay the process for you.

Please give as much information as you can to help us identify the records you are particularly interested in. Include for example, a date range and details of any specific information you would like to know. We will only send you the data that you have requested and that we hold on our records.

[illegible]

Please indicate ✓ the areas your records are held (where you received your care)

Please note for General Practitioner (GP) records you must contact your surgery yourself.

Nobles Hospital Group

	General Medical Record held by Nobles <i>Includes e.g. surgery</i>	<i>Does your request include the areas listed in the adjacent column? Please ✓ if it does.</i>
	Nobles - Audiology	
	Nobles - Emergency Department (A&E)	
	Nobles - Maternity	
	Nobles - Pathology / Results	
	Nobles - Radiology (images, scans & X-rays)	
	Nobles - Physiotherapy at all sites	<i>Please state location in "My Request" Section (page 3)</i>
	Ramsey Cottage Hospital	
	Occupational Therapy at Nobles site	
	Occupational Therapy - other sites	<i>Please state location in "My Request" Section (page 3)</i>
	Dieticians	

Community and Primary Care Health Services

	Manx Emergency Doctors Service (MEDS)	
	Adult Learning Disabilities Liaison Nurse	
	Adult Learning Disabilities	
	Adult Speech & Language Therapy	
	Adult Therapy Services	
	Parkinson's Nurse Specialist	
	Continence Advisor	
	Long Term Conditions Coordinators	
	Health Visitor for vulnerable Adults	
	Health Visitors	
	Community Health Safeguarding Team	
	Tissue Viability Nurse	
	Ramsey wound management	
	Podiatry	
	Wheelchair Services	
	Family Planning Clinic	
	District Nurses	
	School Nurses	
	Children's Therapy Services	
	Government Dental Services	
	IOM Prison Health Service	
	Opticians	<i>please specify optician attended and dates if possible in "My Request" Section (page 3)</i>

Social Services

	Children & Families Social Care	
	Adult Social Work	
	Adult Residential Care	

Other Services

	Mental Health Services	
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The list above is not exhaustive please use the box on the following page if necessary.

The list above is not exhaustive, if you cannot find the area you had your care in please tell us about it here:

Section 03 – Children's records (if applicable)

Please note – Personal information about a child will only be disclosed to parents, advocates or solicitors, if staff are satisfied that the child's informed consent has been freely given, or it is in the child's best interest. Information will only be disclosed to those parents/agents who have signed the form. Both parents should sign the form if this is a joint application.

Manx Care will seek consent of the child, or young person, when they are of an age and understanding to give informed consent freely to their data being released to you, even if you have parental responsibility for them. If they are deemed competent to make the decision, we will honour it. Should they refuse to consent, we may not disclose the information to you.

Please detail the children that you would like records for:

Full Name:		Date of Birth:	
Address:	Postcode:		
Full Name:		Date of Birth:	
Address:	Postcode:		
Full Name:		Date of Birth:	
Address:	Postcode:		
Continue on a separate sheet if required.		Please tick this box if a separate sheet is included:	

Section 04 – Previous Subject Access Requests (if Applicable)

Please note – this section only applies if we have had a previous subject access request (SAR) disclosure for the person named in Section 1. SARs made within 6 months of each other may be declined if the information we hold has not been updated.

Date of previous SAR application:	Name on previous Application:
Details of previous records requested:	

Section 05 – Representative's Details (if relevant)

Representative's name and company (if applicable)	
	Postcode:
Representative's telephone number	
Representative's email address	

Section 06 – Declaration (mandatory - tick as appropriate) and identity proofs

	I am the person named in Section 01 . The information supplied in this request is correct
	I am the person named in Section 01 . The information supplied in this request is correct and I would like my data to be disclosed to the representative, named in Section 05 above.
	I have parental responsibility for the person(s) named in Section 03 (see guidance notes).
Signed:	
Print Name:	Date signed:
A person who impersonates another, or attempts to impersonate another, may be guilty of an offence.	

To establish your identity (so that we can release your records) we need to see:

- one photo identity proof and
- one proof of the address you live at.

Do not send in original documents - a photocopy is acceptable.

Identity proof required	Type of copy proof submitted with the application
Photographic proof: e.g. driving licence, passport, IOM Government 18+ card	
Proof of where you live: e.g. a recent utility bill, bank statement or official IOM Government letter. It must have your own name on the document.	

Who do I contact if I have any questions and need some help?

Information Governance Team
Tel: (01624) 642621
Email: ManxCareSARS@gov.im
Please title your email "SAR Application"

What happens next?

Use this checklist to help make sure your application is valid	
	Are the contact details in Section 1 (and Representative Details in Section 5 – if applicable) correct?
	Have you provided enough detail about your request in Section 2 ?
	Have you signed Section 6 ?
	Have you enclosed two forms of copy identification proofs?
	If applicable - have you enclosed proof of parental responsibility?
	If applicable - have you enclosed authority to represent the data subject?

Send the form and copy proofs to:

Information Governance Team
Garaghyn Glass,
Nobles Hospital Site,
Braddan,
Isle of Man
IM4 4RJ

Tel: 642621

What we do once we have received your application.

- We will acknowledge your request in writing and start processing your records.
- If your request is valid, but we are unable to identify you we will advise you of this. Your request may be closed or delayed because of this.
- We will write to you again once the record(s) is ready for collection. We will also write to confirm if there are no records available.

Please note:

- The period of one calendar month (in which we must respond to your request) cannot commence until we

are satisfied that the proper documentation has been received.

Subject Access Request - Guidance Notes for completing the application form

Subject Access Requests - Background

Subject to certain exemptions, you have a right to be told whether we hold any personal information about you and a right to have a copy of that information.

Any third party information held within your records will be removed from any copies given to you. You are not entitled to be given information about someone else, unless that person agrees and gives their written consent.

If you wish to discuss any aspect of your request; please telephone the Manx Care Information Governance Team: **(01624) 642621** for further guidance.

A Subject Access Request cannot be processed without the data subject's (the person whose details are being requested) signature (consent) unless you are requesting children's records and you have parental responsibility.

Agents (for example: Advocates) may request information on behalf of a data subject. Manx Care retains the right in certain circumstances to establish informed consent with an individual if an Agent is acting on their behalf prior to disclosure.

Section 01 - Proof of Identity

We need to be satisfied that you are who you say you are.

Consequently, two forms of evidence of identity will be required to process your application.

These proofs **should be a photocopy**; do not provide the original documents as we cannot be responsible for their safe keeping.

Section 01 – Fee and processing your application

Under GDPR, most requests for information can be made free of charge. However, a reasonable fee can be charged for further copies of the same information, particularly if it is repetitive.

Manx Care has **one calendar month** from when payment is received (if applicable) to process your Subject Access Request. Once this completed form and the above fee (if applicable) is received by Manx Care, your application will be processed accordingly. Please note that the time scale can be extended by a further two months where the request is complex. You will be contacted within the first calendar month if an extension is required.

The information that we disclose to you is a copy of your data held and not a disclosure of the original document(s).

A copy of any information supplied must be collected by you. It will be posted only in exceptional circumstances.

Section 02 - Details of information required (mandatory)

“My request – please write clearly” in this box please describe the information you want.

Please give as much information as you can to help us identify the record(s) you are particularly interested in. Include for example a date range and details of any specific information you would like to know.

It may be that your request covers more than one service area therefore place a tick in the relevant service areas listed. If the area you received your care in is not on the list please use the box below to say the where you had your care. It is helpful to list the location as well.

If your request is not clear we will contact you for further clarification and this will delay the process for you. If you need any help with the completion of your application please telephone us on the number listed on page 7.

Section 03 – Children(s) Records

This section is to be used if you are requesting your child(s) records.

Please note:

Personal information about a child will only be disclosed to parents and agents if staff are satisfied that the child's informed consent has been freely given, or it is in his/her best interest. Information will only be disclosed to those parents/agents who have signed the form. Therefore, both parents should sign the form if this is a joint application.

We will seek the consent of children and young people where they are of an age and understanding to give informed consent freely to release the documents (their data) to you, even if you have parental responsibility for them. If they are deemed competent to make this decision, we will honour it. Should they refuse to consent, we may not disclose the information to you.

Proof of parental responsibility, for example, a birth certificate may be requested in addition to the data subject's own identification. We may also ask for further documentation if necessary.

Section 04 – Previous Subject Access Requests (if Applicable)

This information helps us to link any requests that may have been made previously about the same person.

Section 05 – Representative's Details (if relevant)

A representative is a legal company who has been employed by you to deal with your legal matters. In the case of children, the parent can act as a representative, if Parental Responsibility is proven, and the child is agreeable.

Section 06 – Declaration (mandatory - tick as appropriate) and identity proofs

For this to be a valid request you must complete the declaration and state the type of copy identity proofs you are providing.