

**SEDLESCOMBE HOUSE SURGERY P.P.G.**

**Statement of Privacy & Confidentiality**

It is over 2 years since the introduction of the General Data Regulations 2018.

To comply with the requirements of those regulations *(a review must be undertaken every 2 years*) it is therefore incumbent upon our P.P.G./Surgery to request all serving PPG and Virtual members complete the form below.

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| **1, I give my consent** *(by signing below)* **for my personal data to be held by**  **Sedlescombe House Surgery and its PPG as (Data controllers).****2, I give my consent for them to contact me either by the Surgery its P.P.G.****3, I understand that my data will not be shared with other agencies or for any**  **purpose other than PPG business/activities.****4, My data shall not be transferred abroad.****5, My data will be held for a maximum of 2 years at which time I will be asked to** **renew my consent.** **6, I have the right to request my data is amended or erased at any time.****7, I have the right to complain to the Information Commissioners Office (ICO) if I** [Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Drawing Tools tab to change the formatting of the pull quote text box.] **am unhappy with the way my data is being managed.**You may opt out or change your details at any time by contacting the Surgery or the PPG Chairman/Secretary of the PPG |
| Name (*Print*) :-  |
| Name (*Signature*) :- |
| E-mail address:- |
| Date:- |
| **Please return this form to the Surgery**  |

**If at any future date:-**

1. You leave the Practice as a Patient
2. You wish to resign as a PPG member (*but remain as a Patient*) Please inform Me or the Surgery
3. Your PPG membership is revoked by the Practice

All your registered details relating to your membership of the PPG will be expunged.

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| Reviewed/Revised02/10/2021 | Addition of Reviewed/Revised Box  |
| 15/11/2021 | Adding signature Box plus minor wording adjustments  |

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