**Dove River Practice Patient Participation Group (PPG)**

**Member Consent Form**

Dear Colleagues,

**Re: General Data Protection Regulations, (GDPR)**

With regard to GDPR which came into force for all organisations across the EU, from 25th May 2018. As you are regularly involved with the work of the Dove River Practice Patient Participation Group (PPG), we have to contact you on how we hold and manage your contact information.

* I regularly want to participate in the Quarterly Meetings;
* I want to be a Virtual Member and receive updates about the PPG

Please delete one of the above.

The information you supply us will be used lawfully in accordance with the GDPR regulations. GDPR gives you the right to know what information is held about you and sets out the rules to make sure that this information is handled properly.

Currently, your information is used so that:

* Members of the PPG will routinely communicate by use of email;
* Only known to the elected officers of the PPG;
* It is stored on personal computers, tablets or mobiles held by the PPG elected officers;
* PPG members will only be contacted by telephone if deemed essential;
* If anyone wishes their data to be removed this will be done. After this deletion no further correspondence concerning the PPG will be sent to that person;
* The person(s), who made the request to be deleted, can ask to be re-entered onto the database. However, in order for this to take place the person(s) have to complete the Consent Form again and send it to the PPG elected officers;
* When contacting the whole membership via a group email this will be done by “blind copy” so that no-one can see other contact details;
* If direct email with named contact(s) is received by the officers of the PPG, then it will be assumed that the person(s) have given their consent for any response to be with email details shown.

Under the GDPR regulations, in order to communicate with you, we need to obtain your explicit consent to allow us to continue to hold your contact information and use it to correspond with you.

We therefore request that you respond to this statement with either of the following:

Under the General Data Protection Regulations, (GDPR), of May 2018,

* I give you explicit consent to store my personal contact details and you may use them to contact me whenever you wish for matters relating to the Dove River Practice PPG.
* I do not give you consent to store my personal contact details and I request you delete them.

Please delete one of the above.

Please complete the details below and either return the completed Consent Form to the address below, or attach to an email to doveriverppg2@gmail.com .

Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

You may withdraw your consent for us holding your data at any time.

Thanking you in advance,

Chair Dove River Practice PPG

Dove River Practice

Tutbury Health Centre

Monk Street

Burton-on-Trent

Staffordshire

DE13 9NA