

Please list below the name of your GP and any specialist(s) who have or are currently treating you in relation to your condition(s) - *please continue on a separate sheet if necessary.*

Name/Address of GP:	_____
_____	_____
Name/Address of Specialist	_____
_____	_____
Name/Address of Specialist	_____
_____	_____
Name/Address of Specialist	_____
_____	_____
Name/Address of Specialist	_____
_____	_____
Name/Address of Specialist	_____
_____	_____

To reduce unnecessary delay to your assessment it is essential that you return the consent forms *as soon as possible* to NIPB Police Administration Branch.

Please note: All NIPB Police Administration Branch staff have signed a confidentiality agreement and will have access to your clinical record solely for the purpose of processing your application and any subsequent appeal or reassessment/reconsiderations.

ACCESS TO PERSONAL FILES AND MEDICAL REPORTS ORDER (NI) 1991

This is a summary of your principal rights under the Order, which is concerned with medical reports provided for employment purposes by a doctor who has been or is looking after you in a 'normal' doctor/patient capacity. You have three options:-

OPTION 1: You consent to the application for the report and indicate that you do not wish to see the report before it is supplied. If you change your mind after the application is made and tell the Board in writing, 21 days will be given after such notification so that you may arrange to see the report (if the report has not already been supplied before you changed your mind). Whether or not you decide to see the report before it is sent, you have the right to request a copy of the report at any time however the Board is entitled to make a charge for this.

OPTION 2: You may consent to the application and indicate your wish to see the report before it is supplied.

The Board will wait 21 days after a copy of the report is issued to you and if no further communication is received it will be assumed you consent to it being supplied to the Selected Medical Practitioner.

When you see the report, if there is anything in it which you consider incorrect or misleading, you can request (but this request must be in writing) that the issuing doctor amend the report, but he/she is not obliged to do so. If the doctor refuses to amend it you may:

- (I) withdraw consent for the report to be issued
- (II) ask the doctor to attach to the report a statement setting out your own views
- (III) agree to the report being issued unchanged

NOTE: The doctor in question is not obliged to show you any parts of the reports which he/she believes might cause serious harm to your physical or mental health or that of others, or show you information supplied by others without their permission. If this is the case, the doctor will tell you if your access to the report is limited.

OPTION 3: You may withhold your consent to an application for a report from a doctor.