

PATIENT CONSENT FORM

Trent PTS is an independent Psychological Therapies Service commissioned by the NHS in Derbyshire to provide a range a wide range of short-term Psychological Therapies by providing choice and easy access, through a range of services:

In order to offer you therapy and an effective, coordinated service, we share information about you with Clinicians involved in your treatment, including personal data, information about your health condition and any information related to risk to you or other people.

Evaluation of the Service:

All patients are asked to complete a series of questionnaires before, during and after their therapy sessions. These questionnaires assist us in understanding your problems and can show whether psychological therapy is effective in helping you or not. The information received from the questionnaires is treated as strictly confidential unless there is any information related to risk to you or other people.

In addition, we will use the information from the questionnaires to evaluate both the local service and the national programme. This enables us to compare our services against others and helps us to learn from each other. The information used in the national evaluation is anonymous and no identifiable personal information is shared.

.....

PLEASE COMPLETE

I have read the consent form and agree to the fair and lawful processing of personal information for the purposes of analysis and research in accordance with the Data Protection Act 1998. I understand that the Researchers will not have access to any personal identifiable data and I will not be identified in anything that is written or reported regarding the research.

Name (BLOCK CAPITALS).....

Date

Signature.....