

RESPONDENT INFORMATION FORM

BETTER HEALTH, BETTER CARE: A DISCUSSION DOCUMENT

Please complete the details below and return it with your response. This will help ensure we handle your response appropriately. Thank you for your help.

Name: _____

Postal Address: _____

1. Are you responding: (please tick one box)

(a) as an individual (go to 2a/b and then 4)

(b) **on behalf of** a group/organisation (go to 3 and then 4)

INDIVIDUALS

2a. Do you agree to your response being made available to the public (in Scottish Executive library and/or on the Scottish Executive website)?

YES (go to 2b below)

NO, not at all We will treat your response as confidential

2b. **Where confidentiality is not requested**, we will make your response available to the public on the following basis (**please tick one** of the following boxes)

Yes, make my response, name and address all available

Yes, make my response available, but not my name or address

Yes, make my response and name available, but not my address

ON BEHALF OF GROUPS OR ORGANISATIONS

3. The name and address of your organisation **will be** made available to the public (in the Scottish Executive library and/or on the Scottish Executive website). Are you content for your **response** to be made available also?

YES

NO We will treat your response as confidential

SHARING RESPONSES/FUTURE ENGAGEMENT

4. We will share your response internally with other Scottish Executive policy teams who may be addressing the issues you discuss. They may wish to contact you again in the future, but we require your permission to do so. Are you content for the Scottish Executive to contact you again in the future in relation to your consultation response?

YES NO