I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, a Sage Representative\*, consider that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is unable to give instructed consent for Sage Advocacy to act on his/her behalf at this time, however, I believe that support and advocacy is necessary for him/her.

I have gathered as much relevant information as possible in regards to the above-named person, including his/her past or present wishes, to inform what steps I can take in supporting and advocating for him/her. I will at all times act in good faith and for the benefit of the above-named person.

Sage Advocacy will provide support and advocacy on matters relating to:   
  
🞏 Finances 🞏 Social / Personal 🞏 Healthcare / Patient Advocacy

Specifically, the following issue(s):  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Person(s) / Organisation(s) with whom Sage Advocacy has authority to act:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Witness: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

\*Where the named individual is no longer in the role of a Sage Representative, Sage Advocacy is considered to have authority to act and will appoint a representative of the organisation to act on behalf of the named person.

Non-Instructed Advocacy

**Information and Data Protection**

Personal data is processed by Sage Advocacy based on the individual’s explicit consent. Where the individual is unable to give consent, personal data is processed by Sage Advocacy based on the vital interests of the individual. Sage Advocacy complies with the Data Protection Acts, 1988-2018 (including GDPR).

All information provided is safeguarded securely, safely, and privately. Sound recordings of any meeting whether involving third parties or otherwise, without permission of all participants will be regarded as a data breach.

The information may be retained indefinitely for safeguarding purposes, and may be anonymised for systemic case research and statistical purposes.  We do not share any service user information with third parties without explicit consent, unless we are required to do so by law or to protect the service user or another individual from serious harm.

There are rights available to data subjects, including the right to withdraw consent.  For further information see <http://ec.europa.eu/justice/data-protection/reform/files/regulation_oj_en.pdf>

*For Sage Advocacy use only*  
Date received by Case Manager: \_\_\_/\_\_\_/\_\_\_\_\_\_  
Date approved by Case Management Group: \_\_\_/\_\_\_/\_\_\_\_\_\_

Signed by Case Manager \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Version: January 2025