

APPLICATION FOR ONLINE ACCESS TO MEDICAL RECORDSPlease read form carefully and use **BLOCK CAPITALS** throughout**SECTION A: PATIENT DETAILS**

PATIENT Surname				Age	
PATIENT First Name(s)			PATIENT DOB		
PATIENT Home Address				Post Code	
PATIENT Email address					
PATIENT Mobile No.			PATIENT Home No.		
I consent to the practice contacting me by SMS / email Yes <input type="checkbox"/> No <input type="checkbox"/>					

SECTION B: LEVEL OF ACCESS REQUIRED**SINGLE PATIENT ACCESS – DO NOT COMPLETE THIS SECTION IF REQUESTING PROXY ACCESS**

I, the patient, wish to have access to the following online services

1) BASIC ACCESS:

Booking appointments, requesting repeat medication, view Summary Care Record, update address and contact details

2) ENHANCED ACCESS:

All of the Basic Access rights, plus:

Detailed Coded Record i.e. allergies, medication, immunisations, results

3) FULL ACCESS:All of the BASIC and ENHANCED rights, plus **Full Clinical Record**. If you request this level of access you **must** attach a signed letter to the form, stating your reason for this request. It is not currently a contractual requirement to provide full access* (www.nhs.uk/patientonline)

Letter Attached

* Access to your Full Clinical Record is at the discretion of your doctor and this may not be granted. It may take longer to process your request for access.

SECTION C: DECLARATION**I wish to access my medical records online and understand and agree with the statement below**

I confirm that I have read the information leaflet provided by the practice and agree to be responsible for the security of the information that I see or download. I understand that if I choose to share my information with anyone else, this is at my own risk. I understand that I should contact the practice as soon as possible if I suspect my account has been accessed without my permission or unlawfully. I understand I will contact the practice should I see information that is not about me or is incorrect.

Patient Signature		Date	
-------------------	--	------	--

SECTION D: LEVEL OF ACCESS FOR PROXY**PATIENT – only complete if you are granting proxy access rights below. I wish the proxy named on this form in section E and F to have access to the following online services**

(delete as applicable)

Allow appointment Booking	Yes / No	Allow medication requesting	Yes / No
The options below are only available for patients aged over 16 years			
Allow viewing of summary record	Yes / No	Allowing viewing of coded record	Yes / No

SECTION E: REQUESTER DETAILS**Patient aged up to 16 years – Person REQUESTING Proxy Access to records**

The person named below must also be registered to use online services:

- * If you ARE a registered patient at THIS PRACTICE and not registered for online access, please complete a separate online registration form and attach it to this form,
- * If you ARE NOT a patient at THIS PRACTICE, you will be issued with online access details
- * Please be aware that from the child's 16th birthday proxy access will be revoked
- * Section D (above) **must** be completed

Surname		First name(s)	
Phone no.		Date of birth	

Continued overleaf

Proxy access aged up to 16 years continued:

Home Address		Post code	
Email address (mandatory):			
Your relationship to the patient:	Parent / Guardian / Carer / Other:		
<p>If the patient is aged between 11 – 16 they must sign this disclaimer. If the patient is unable to sign themselves, please sign and print your name below. Under 11 does not require child signature.</p> <p>DISCLAIMER: I consent to the above named person having proxy access to my medical records. I understand that I can change my mind about this at any time and if I wish to do so must contact the practice and tell them the reason.</p>			
Aged between 11 and 16: Patient Signature		Date	
Print name if signing on behalf of patient			

SECTION F: REQUESTER DETAILS

Patient aged 16 and over – Person REQUESTING Proxy Access to records

- The person requesting access that is named below must also be registered to use online services:
- If you ARE a registered patient at THIS PRACTICE and not registered for online services please complete a separate online registration form and attach it to this form
- If you ARE NOT a patient at this practice you will be issued with online access details
- If you are requesting proxy access to the medical records of a patient that is aged 16 or over, then you must complete the requester's details below, plus relationship to the patient. The patient must also sign to give consent
- Section D must also be completed (page 1)

Surname		First name(s)	
Phone no.		Date of birth	
Home Address		Post code	
Email address (mandatory):			
Your relationship to the patient:	Parent / Guardian / Carer / Other:		
<p>If the patient is unable to sign themselves, please sign and print your name below and confirm reason patient unable to sign</p> <p>DISCLAIMER: I consent to the above named person having proxy access to my medical records. I understand that I can change my mind about this at any time and if I wish to do so must contact the practice and tell them the reason.</p>			
Reason patient unable to sign:			
Aged between 16 and over: Patient Signature		Date	
Print name if signing on behalf of patient			

Please note that proxy access is only available through 'Patient Access'.

Log in information will be emailed within 5 working days from receipt of fully completed and validated form and ID

FOR PRACTICE USE ONLY											
Patient NHS Number										Photo ID and proof of residence	
EMIS Number										Vouching with information in record	
Identity verified by							Date			Vouching	
Level of PATIENT access granted	Basic (appointments/medication/SCR/demographics) <input type="checkbox"/>										
	Detailed (appointments/medication/SCR/demographics/detailed coded) <input type="checkbox"/>										
PROXY ACCESS Basis for granting access	Full Access (everything) <input type="checkbox"/>										
	GP Authorised <input type="checkbox"/> Date <input type="text"/>										
	Relationship to Patient <input type="text"/>										
PROXY ONLY Access Granted	Patient consent (verbal) <input type="checkbox"/> Patient consent (written) <input type="checkbox"/> Parental responsibility <input type="checkbox"/>										
	Patient lacks capacity (court order) <input type="checkbox"/> Patient lacks capacity (power of attorney) <input type="checkbox"/>										
	Patient lacks capacity (patient's best interests) <input type="checkbox"/>										
PROXY ONLY Access Granted	Appointments <input type="checkbox"/> Medication <input type="checkbox"/> SCR <input type="checkbox"/> Detailed Coded <input type="checkbox"/> Full record <input type="checkbox"/>										
	NOT GRANTED <input type="checkbox"/> (Reason: _____)										
Date account created & PIN sent							Actioned by				

Online Services Records Access

Patient Information leaflet 'It's your choice'

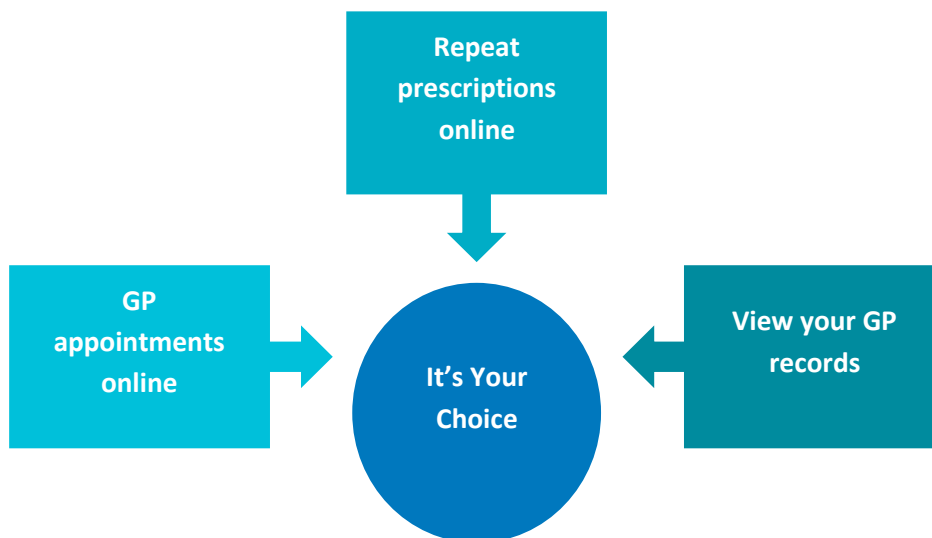
If you wish to, you can now use the internet to book appointments with a GP, request repeat prescriptions for any medications you take regularly and look at your medical record online. You can also still use the telephone or call in to the surgery for any of these services as well. It's your choice.

Being able to see your record online might help you to manage your medical conditions. It also means that you can even access it from anywhere in the world should you require medical treatment on holiday.

If you decide not to join or wish to withdraw, this is your choice and practice staff will continue to treat you in the same way as before. This decision will not affect the quality of your care.

You will be given login details, so you will need to think of a password which is unique to you. This will ensure that only you are able to access your record – unless you choose to share your details with a family member or carer.

The practice has the right to remove online access to services for anyone that doesn't use them responsibly.



It will be your responsibility to keep your login details and password safe and secure. If you know or suspect that your record has been accessed by someone that you have not agreed should see it, then you should change your password immediately.

If you can't do this for some reason, we recommend that you contact the practice so that they can remove online access until you are able to reset your password.

If you print out any information from your record, it is also your responsibility to keep this secure. If you are at all worried about keeping printed copies safe, we recommend that you do not make copies at all.

Before you apply for online access to your record, there are some other things to consider.

Although the chances of any of these things happening are very small, you will be asked that you have read and understood the following before you are given login details.

Things to consider

Forgotten history

There may be something you have forgotten about in your record that you might find upsetting.

Abnormal results or bad news

If your GP has given you access to test results or letters, you may see something that you find upsetting to you. This may occur before you have spoken to your doctor or while the surgery is closed and you cannot contact them.

Choosing to share your information with someone

It's up to you whether or not you share your information with others – perhaps family members or carers. It's your choice, but also your responsibility to keep the information safe and secure.

Coercion

If you think you may be pressured into revealing details from your patient record to someone else against your will, it is best that you do not register for access at this time.

Misunderstood information

Your medical record is designed to be used by clinical professionals to ensure that you receive the best possible care. Some of the information within your medical record may be highly technical, written by specialists and not easily understood. If you require further clarification, please contact the surgery for a clearer explanation.

Information about someone else

If you spot something in the record that is not about you or notice any other errors, please log out of the system immediately and contact the practice as soon as possible.

More information

For more information about keeping your healthcare records safe and secure, you will find a helpful leaflet produced by the NHS in conjunction with the British Computer Society: Keeping your online health and social care records safe and secure

<http://www.nhs.uk/NHSEngland/thenhs/records/healthrecords/Documents/PatientGuidanceBooklet.pdf>