



## Patient Consent Form for Access to Online Records

You can now view your GP medical record online to look at test results, details of consultations and your medical history, including current and past medication.

If you would like to have secure online access to your records, we need to make sure that you understand what this involves and that you are happy for us to use the information about you (provided below) to set up and operate the service.

The following form will take you through the things you need to think about. By signing the form, you will be giving us your permission to go ahead with setting up the service for you. If you decide not to join, or wish to withdraw, it will not affect your treatment in any way.

Access is granted at the discretion of the practice. Your request for access may take up to 1 month to process. You will be informed if access cannot be granted.

**To verify your identity, please ensure you bring valid photographic ID when returning this form.**

Patient Details	
First Name:	
Surname:	
Date of Birth:	
1 <sup>st</sup> line of address:	
Email address*:	

**I would like access to the following (please tick the items you wish to have access to)**

Book appointments	<input type="checkbox"/>
Order medications	<input type="checkbox"/>
Limited access to parts of my medical record	<input type="checkbox"/>
Full access to my medical record	<input type="checkbox"/>

**Declaration (please tick as appropriate)**

<b>1.</b> I agree to my GP practice giving me access to my record online.	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>2.</b> I have been provided with the information leaflet about access to GP medical records which I have read and understood.	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>3.</b> I agree to use the system in a responsible manner in accordance with all instructions given to me by the practice. If not, access may be withdrawn.	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>4.</b> If I see information which does not relate to me, I will immediately log out and report the matter to the practice as soon as possible.	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>5.</b> I agree that it is my responsibility to keep my username and passwords secure. If I think these have been shared inappropriately, I will reset them using the instructions supplied. I am also responsible for keeping any information I may print from the record safe.	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>6.</b> I agree that my details may be used to contact me about how useful I find the service and whether it could be improved.	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>7.</b> I understand that online access is granted at the discretion of the practice, considering my best interests. I will be informed of any decision to withdraw the service. Please note, this does not affect your rights of Subject Access under the Data Protection Act.	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>8.</b> The practice makes every effort to record information as accurately as possible, however there may be information that you do not feel is correct. If I notice any inaccuracies with my record, I will inform the practice manager as soon as possible of any errors or omissions.	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>9.</b> I understand that I may see information on my record that I was unaware of, or have forgotten about, that could cause distress.	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>10.</b> I understand that as before, I will be informed directly by the practice of any test results which require further action. However, I understand that I may see these results online before the practice has been able to contact me. This could be while the surgery is closed and there is no one available to discuss them with me.	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>11.</b> I understand that the information may not be a complete record and I should not rely on it for insurance purposes.	Yes <input type="checkbox"/> No <input type="checkbox"/>

Signed:		Date:	
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<b>Practice Use Only</b>			
ID Checked	<input type="checkbox"/>	Staff Member Name:	
Level of Record access enabled	Core summary care record		<input type="checkbox"/>
	Detailed coded record		<input type="checkbox"/>
Account created by:		Date:	

## Accessing GP Records Online

Practices are increasingly enabling patients to be able to request repeat prescriptions and book appointments online.

Some patients may wish to access more information online and contractually from 1st April 2015 practices are obliged to assist access to Medications, Allergies and Adverse Reactions as a minimum.

However, this requires additional considerations as outlined in this leaflet. You will be asked that you have read and understood this leaflet before consenting and applying to access your records online. The practice will also need to verify your identity.

### 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 & Social Care Records Safe and Secure.

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

### Please note:

- **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.**
- **The practice may not be able to offer online access due to several reasons, such as concerns that it could cause harm to physical or mental health, or where there is reference to third parties. The practice has the right to remove online access to services for anyone that doesn't use them responsibly.**

## Key Considerations

<b>Forgotten History</b>	There may be something you have forgotten about in your record that you might find upsetting.
<b>Abnormal results or bad news</b>	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 had the opportunity to speak to a doctor, or while the surgery is closed, and you cannot contact them.
<b>Choosing to share your information with someone</b>	It's up to you whether you share your information with others – perhaps family members or carers. However, while this is your choice, it is also your responsibility to keep the information safe and secure.
<b>Coercion</b>	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.
<b>Misunderstood information</b>	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.
<b>Information about someone else</b>	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.