**Patient Online registration form**

**Access to GP online services**

Patient Online has been designed to support our patients by providing access to online services which include things like, booking and cancelling appointments, ordering your repeat prescription and viewing certain parts of your medical record.

To gain access to your online account the below registration form must be completed and handed back to the receptionist.

**Our Practice Policy ensures that all applications for online registration will be reviewed and we aim to inform you within 2 weeks whether this has been approved.**

*Please complete the following:*

|  |  |  |  |
| --- | --- | --- | --- |
| Surname |  | | |
| First name |  | | |
| Date of birth |  | | |
| Address |  | | |
| Postcode |  | | |
| Email address |  | | |
| Telephone number(s) |  | Mobile number |  |
| May we contact you via text message? | YES / NO |

## I wish to have access to the following online services (tick all that apply):

|  |  |
| --- | --- |
| 1. Booking appointments | 🞏 |
| 1. Requesting repeat prescriptions | 🞏 |
| 1. Accessing my summary (medication, allergies, sensitivities) | 🞏 |

|  |  |  |  |
| --- | --- | --- | --- |
| Signature |  | Date |  |

*In the event of an approval of your online application, we hope that the online services provided to you are beneficial. Some patients however (e.g. who suffer from a long term condition or require regular monitoring of their condition) may find that having access to more detailed information within their medical record is required. If you feel that this applies to you, please ask the receptionist for another registration form to request access to detailed coded information.*

***If you are happy and fully consent to the services listed above, please hand this form back to the receptionist.***

**Patient Online registration form**

**Access to my medical record**

By completing this form you are asking us to make information from GP records (such as a list of your diagnoses, vaccinations, and the types of tests you have had done) available on the Internet via SystmOnline. Your information will not be made available without your permission.

**Things to Consider before completing this registration form:**

Although the chance of the following things happening is very small, please read and tick the box to confirm that you have understood:

**1.** **Forgotten History**

There may be something you have forgotten about that could cause distress

**2.** **Abnormal Results/Bad News**

You may see this before you have spoken to the doctor, or while the surgery is

closed and you cannot contact them

**3**. **Errors in your Record**

In this case please contact the Surgery

I wish to access my medical record online and understand and agree with each statement (please tick)

|  |  |
| --- | --- |
| I have read and understood the information in the **patient information leaflet** | 🞏 |
| I will be responsible for the security of the information that I see or download | 🞏 |
| If I choose to share my information with anyone else, this is at my own risk | 🞏 |
| I will contact the practice as soon as possible if I suspect that my account has been accessed by someone without my agreement | 🞏 |
| If I see information in my record that is not about me, or is inaccurate I will log out immediately and contact the practice as soon as possible | 🞏 |

|  |  |
| --- | --- |
| Surname |  |
| First name |  |
| Date of birth |  |
| Address |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Signature |  | Date |  |

**Our Practice Policy ensures that all applications for online registration will be reviewed and we aim to inform you within 2 weeks whether this has been approved.**

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

|  |  |  |  |
| --- | --- | --- | --- |
| For practice use only Identity verified through  (tick all that apply) | Vouching 🞏  Vouching with information in record 🞏  Photo ID 🞏  Proof of residence 🞏 | Name of verifier | Date |
| Name of person who authorised  (if applicable) |  | | Date |

**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. This is rarely necessary but may be the best option if you do not use them responsibly or if there is evidence that access may be harmful to you. This may occur if someone else is forcing you to give them access to your record or if the record may contain something that may be upsetting or harmful to you. The practice will explain the reason for withdrawing access to you and will re-instate access as quickly as possible.** | **Repeat prescriptions online**  **GP appointments** **online**  **View your GP records**  **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 information that you can see online may be misleading if you rely on it alone to complete insurance, employment or legal reports or forms.**  **Be careful that nobody can see your records on screen when you are using Patient Online and be especially careful if you use a public computer to shut down the browser and switch off the computer after you have finished.** |

|  |
| --- |
| **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. |

|  |  |
| --- | --- |
| 1. **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. This may occur before you have spoken to your doctor or while the surgery is closed and you cannot contact them. If this happens please contact your surgery as soon as possible. The practice may set your record so that certain details are not displayed online. For example, they may do this with test results that you might find worrying until they have had an opportunity to discuss the information with you. |
| **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. If it would be helpful to you, you can ask the practice to provide another set of login details to your Online services for another person to act on your behalf. They would be able to book appointments or order repeat prescriptions. They may be able to see your record to help with your healthcare if you wish. Tell your practice what access you would like them to have. |
| **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> |