Dear GP Surgery,

**PATIENT REQUEST FOR VIEWING OF GP DETAILED CARE RECORD TO BE ACTIVATED**

This form is from your patient [details below] requesting Detailed Care Record Access from your GP Surgery via the NHS App, or GP Online Apps such as EMIS Patient Access, TPP Air Mid, or others.

First, some background information: your patient has been through a short, free, online learning course created by Digital Health Coach UK at <https://www.digitalhealthcoachuk.net/gp-record-access-is-it-for-you> which has covered the benefits and risks of having online access to their record, including test results and letters, plus security advice. This is based on material created by Dr Amir Hannan, MBE of [Haughton Thornley Medical Centres](http://www.htmc.co.uk/), with patients from the practice and the patient participation group [PPG], who have all been pioneers of patients using GP Record Access, since 2007.

You will want to make your own assessment based on Surgery policies about whether to grant Detailed Care Record Access in this case.

Secondly, as part of the process, your patient has completed the questionnaire below to confirm their understanding of the online learning material. **Dear patient, please ring your answers below.**

|  |  |
| --- | --- |
| **Question 1:** How well can you read, and understand, English? | [No] [A little] [Well] |
| **Question 2:** Have you registered for ordering repeat prescriptions and booking appointments on-line? | [Y] or [N] |
| **Question 3:** Do you understand what you can do to help keep your GP Record secure, and will you do it?  | [Y] or [N] |
| **Question 4:** After you have been to the doctor or to the hospital, you can check if the encounter has been recorded and what was discussed. Do you agree this is a good reason to have access to your records? | [Y] or [N] |
| **Question 5:** There may be an instance when accessing your medical records online, you may read some information that could be shocking or upsetting. What do you do if this happens, and you cannot speak to your doctor / nurse immediately?1. Not view the test results, but wait until you see the doctor / nurse
2. Panic and get worked up
3. Look at some of the recommended websites under selfcare on [www.nhs.uk](http://www.nhs.uk)
4. Wait and contact the practice the next working day
5. Contact 111 to get further information
6. Go to A&E for further help
 | [1][2][3][4][5][6]  |
| **Question 6:** You see a new letter has arrived in your electronic health record. You open up the letter to find it is about another patient in the practice. What do you do?1. Read it then tell others what the person suffers with
2. Inform the practice
3. Stay quiet and not tell anybody about it
 | [1][2][3] |
| **Question 7:** Would it upset you if you read something somebody else has said about you with regards to your health?1. No
2. Yes - I don't want this information kept in my record
3. Yes - You should not believe what others say
4. Yes - This could destroy our relationship
5. Don't know
 | [1][2][3][4][5] |
| **Question 8:** Do you feel you understand what GP Records Access means? | [Y] or [N] |

Thirdly, here are details of your patient’s request [these have been filled in on a downloaded form on your patient’s own device, we have not collected Personal Identifiable Information about your patient] on our site. **Dear patient, fill in the form below.**

|  |  |  |  |
| --- | --- | --- | --- |
| Patient Name |  | Patient Date of Birth |  |
| Patient Address |  |

Patient Declaration: *I have read and understood the information presented about GP Record Access, and I understand there may be some risk of worry/harm, as well as benefits, from being able to view my GP Record online. I also understand my GP Surgery may delay or refuse my request, and replies may be delayed in busy periods. I will follow the password and security advice given.*

Please tick the boxes below to request GP Record access to be turned on:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Problems | *Please mark with an X here* | Documents | *Please mark with an X here* | Test results | *Please mark with an X here* |
| Medications | *Please mark with an X here* | Consultations | *Please mark with an X here* | Also, past information | *Please mark with an X here* |

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ /\_\_\_\_\_

**Dear patient, please email your completed form to your GP Surgery, or upload via GP Online Consultation [details for both should be on your GP surgery’s web site].**