Consent to proxy access to GP online services - patient 16 years and older

Date of birth:

Section 1

Name:

 $\label{eq:thm:condition} \textbf{The Patient} - \textbf{This is the person whose records are being accessed}$

Telephone number/s:		Relationshi	Relationship to representative:			
I give permission to my GP practice to give the p	erson in section 2, p	roxy access to o	online services). **	,	
Online prescription management						
I reserve the right to reverse any decision I make	access at any time					
I understand the risks of allowing someone else	to have access to m	my health records.				
I have read and understood the information lea	aflet provided by the	practice				
Signature of patient:			Date:			
Note : ** If the patient does not have capacity to consent to this part of section 1 may be omitted.	grant proxy access and pr	oxy access is consid	dered by the prac	tice to be in the patient's	best intere	st,
Section 2						
The representative – This is the person se	eeking proxy access t	to access the pa	atient's online	records. They must h	nave the	ir
own SystmOnline access with Bideford Medical (•		
	6.1					
I wish to have online access to the records o	if the patient and s	ervices menti	oned in Sect	ion 1		
Name:	Email:			Date of birth:		
Address: Relationship to p		atient:		Telephone/Mobile:		
		• •				
Postcode:						
I understand my responsibility for safeguarding						
I have read and understood the information proconfidential	tice and agree that I will treat the patient information as					
I will be responsible for the security of the information that I see or download						
I will contact the practice as soon as possible if I suspect that the account has been accessed by someone without my						
agreement						
If I see information in the record that is not about the patient, or is inaccurate, I will contact the practice as soon as p					ossible.	1_
I will treat any information which is not about the patient as being strictly confidential						
Signature:	Date:					
For Practice use only						
Identity Verified by (Name):		Date application received:				
Method of Verification (Patient) (2 forms)		Method of Verification Representative (2 forms)				
□ Photo ID – please record number/issuer		□ Photo ID – please record number/issuer				
Passport / Driving Licence		Passport / Driving Licence				
Photo Work Card / Photo Bus Pass		Photo Work Card / Photo Bus Pass				
Other		Other				
□ Proof of residence		□ Proof of residence				
□ Vouching □ Vouching with information in record		☐ Vouching ☐ Vouching with information in record				
Proxy access Authorised by:	Date:					
Level of record access enabled		Notes/comments on Proxy access				
Allow ordering medication □		,				

ONLINE REGISTRATION SERVICES

Important Information – Please read before returning this form

When registered your proxy will be able to use the internet to request repeat prescriptions for any medications you take regularly depending on what access you have requested.

It will be the proxy's responsibility to ensure their login details and password are kept safe and secure. If you/proxy knows or suspects that your record has been accessed by someone that you have not agreed should see it, then they should change their password immediately. If they cannot do this for some reason, we recommend that you/proxy contact the practice so that they can remove online access until your proxy can reset the password.

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

The information that you/proxy can see online may be misleading if you/proxy rely on it alone to complete insurance, employment or legal reports or forms.

The practice has the right to remove online access to services. This is rarely necessary but may be the best option if you/proxy do not use them responsibly or if there is evidence that access may be harmful to you/proxy. This may occur if someone else is forcing you/proxy to give them access to your record or if the record may contain something that might be upsetting or harmful to you/proxy. The practice will explain the reason for withdrawing access to your proxy and will re-instate access as quickly as possible.

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/proxy will be asked to confirm that you/proxy have read and understood this document before your proxy is given access to your details.

Choosing to share your information with someone It is up to you/proxy whether you/proxy share your information with others – perhaps family members or carers. It is your/proxy's choice, but also your/proxy's responsibility to keep the information safe and secure.

Coercion If you/proxy think you/proxy may be pressured into revealing details from your patient record to someone else against your/proxy's will, it is best that you/proxy 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/proxy 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.

Proxy Access: Parents may request proxy access to their children's records and to request prescriptions. The summary and medical record will cease when the child reaches age 11 (prescription requests may continue on request). All proxy access is removed automatically when the child reaches the age of 16. Any subsequent proxy access will need to be authorised by the patient. A competent patient can choose and consent to relatives/carers having access to request prescriptions. (Proxy form MUST be completed) and representative must have their own SystmOnline access.

Note: Proxy access application will not be accepted from any third party commercial company i.e. Insurance company or solicitors.