

Insert practice name

Insert practice logo

## Online services: Records Access Getting ready checklist | step-by-step guide

Area for consideration	Possible ways of working	Practice approach or decision
<b>1. Scale and pace of roll out</b>	<ul style="list-style-type: none"><li>• Set up one or more test patients</li><li>• Offer access to PPG members</li><li>• Offer access to a group of patients with long term conditions</li><li>• Open access to all patients.</li></ul>	
<b>2. What to give access to</b>	<ul style="list-style-type: none"><li>• Summary information as a minimum (but recognising that there are likely to be minimal benefits to patients or practice)</li><li>• Practice discussions between patient and professional over further access to:<ul style="list-style-type: none"><li>○ Test results (viewed by clinician)</li><li>○ Letters (viewed by clinician)</li><li>○ Immunisations or vaccinations</li><li>○ Consultations</li><li>○ Diary entries.</li></ul></li></ul>	
<b>3. Date from which record is available for viewing</b>	<ul style="list-style-type: none"><li>• Date of request for access (recommended when this is before 1 April 2015)</li><li>• 1 April 2015</li><li>• A date chosen by practice in discussion with patient (taking into account the need to remove any third parties, as well as sensitive information that could cause the patient harm).</li></ul>	
<b>4. Mental health patients</b>	<ul style="list-style-type: none"><li>• Patients with mental illness have as much right to read their records as anybody else</li><li>• Some patients need to be considered on an individual basis</li><li>• Limit access to basic record when there is any risk of significant harm.</li></ul>	
<b>5. Access for children, parents and guardians</b>	<ul style="list-style-type: none"><li>• Limit access to patients over 18 years old with exceptions only on a case-by-case basis (recommended whilst more consideration is given to this matter by RCGP, BMA and MDU)</li><li>• Limit access to patients over 16 years old with exceptions on a case-by-case basis</li><li>• Make practice level decisions over whether to give parents or guardians access to records of 12-16 year old patients on a case-by-case basis. Consult proxy access guidance (to follow).</li></ul>	

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6. Third party information	<ul style="list-style-type: none"> <li>• Enable prospective access only (recommended)</li> <li>• Enable access from a given date only after the patient record has been checked for third party information that could cause the patient harm</li> <li>• When full access to a record is proposed but third party data is identified, a conversation may be needed with all relevant parties before access is enabled or content is protected (as appropriate).</li> </ul>	
7. Unexpected bad news or abnormal results	<ul style="list-style-type: none"> <li>• Only enable results and letters for viewing once checked by GP or designated professional (recommended)</li> <li>• Check results during surgery hours and call patients as explained in consent forms</li> <li>• Don't be concerned about all abnormal results</li> <li>• Publicise the availability of information for patients about interpreting test results, for example <a href="http://labtestsonline.org.uk/">http://labtestsonline.org.uk/</a></li> </ul>	
8. Patients giving access to relatives	<ul style="list-style-type: none"> <li>• Advise the patient to look through their full record before allowing access for relatives</li> <li>• Refer to patient information leaflet.</li> </ul>	
9. Wrong letter scanned or incorrect information in notes	<ul style="list-style-type: none"> <li>• Advise the patient to log out and contact the practice at the earliest opportunity</li> <li>• Designate a suitable member of the practice staff to deal with such issues</li> <li>• Refer to <a href="#">NHS England Patient information leaflets</a></li> </ul>	
10. Patients giving access to carers	<ul style="list-style-type: none"> <li>• Patient can choose to share login details but practice needs to consider risk of coercion and if necessary decline access</li> <li>• Practice may set up access for carer with consent of patient unless the patient is proven to be incapable of giving consent</li> <li>• Make policy decision not to provide access to carers, although this isn't recommended and may not be in best interests of patient.</li> </ul>	
11. Child Protection	<ul style="list-style-type: none"> <li>• The recommended default position is that access by a patient should be available from the age of 18, although some practices may allow access from age 12. Consult proxy access guidance (to follow).</li> <li>• Access by parents and guardians to a child's record is a practice level decision, but the RCGP will issue additional guidance</li> <li>• Practices should extend protocols for children's paper-based records, to online records.</li> </ul>	
12. Coercion	<ul style="list-style-type: none"> <li>• During enrolment, practices need to make implications of coercion clear to patients. Consult <a href="#">coercion guidance for general practice</a>.</li> <li>• Consider the risk of coercion on a case-by-case basis as requests for access are received, and if necessary decline access</li> <li>• Remove access when coercion is believed to have taken place.</li> </ul>	