

PRESTON GROVE MEDICAL CENTRE

PATIENT ACCESS POLICY

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1. PURPOSE

Provide guidance to the Primary Health Care Team for the use of Patient Online Access

- Booking appointments
- Ordering prescriptions
- Viewing detailed coded record personal medical records
- Reporting changes to demographic data e.g. change of address etc.

2. INTRODUCTION

From 1.4.2016 patients have the right (GP contract requirement) to request online access to their personal medical records. This is in addition to the online access they can already enjoy for booking appointments, ordering repeat prescriptions and notifying changes to demographic information.

Online access to services demands a consistent and robust approach to comply with information governance (ensures integrity of personal and sensitive data) and identity verification.

IMPORTANT – Access to coded medical information will not be backdated beyond 1.4.16. A review of historical records would take a clinician approximately 10 minutes per patient, a resource we do not have. The EMIS Web system will automatically keep to this date parameter.

3. APPLICATION PROCESS

Usage of any or all of the three elements of Patient Online Access requires the completion of an application process. Central to this is identity verification.

4. AUTHORISATION OF ACCESS

Function	Standard Authorisation Requirements	Additional Authorisation Requirements
Booking of appointment online	Completion of application form, identity verification completed and application form scanned	None
Ordering of Prescriptions		
Access to elements of Medical Record	Completion of application form, identity verification completed and application form scanned	<p>Must be authorised by a GP who may wish to review the record and discuss the content with the patient prior to authorising access.</p> <p>Upon GP approval the application must then be scanned onto the notes before access switched on (21 days to determine access permission.</p> <p>Office Manager or Performance Manager or a person nominated by them to write to the patient in the case of access being denied.</p>
Demographic information	Complete a change of address form and give to admin team	None

5. IDENTIFICATION OF THE PATIENT

Identity verification of the patient must be made before any patient granted any or all of the three components of online access.

Presentation of documents	<p>Accepted photographic identification include:</p> <ul style="list-style-type: none"> • Current UK (Channel Islands, Isle of Man or Irish) <u>passport</u> or EU/other nationalities passport • <u>Passports</u> of non-EU nationals , containing UK stamps, a visa or a UK residence permit showing the immigration status of the holder in the UK* • A current UK (or EU/other nationalities) <u>photo-card driving licence</u> (providing that the person checking is confident that non-UK photo-card driving licences are bona fide) • A <u>national ID card</u> and/or other valid documentation relating to immigration status and permission to work.* <p>Any document that is not listed above (i.e. an organisational ID card) is <u>not</u> acceptable.</p> <p>Accepted confirmation of address documents include:</p> <ul style="list-style-type: none"> • A recent <u>utility bill</u> (gas, electricity or phone) or a certificate from a supplier of utilities confirming the arrangement to pay for the services on pre-payment terms (note: mobile telephone bills should not be accepted as they can be sent to different addresses). Utility bills in joint names are permissible* • <u>Local authority tax bill</u> - valid for the current year* • Current <u>UK photo-card or old-style driving licence</u> (if not already presented as a personal ID document) • Bank, building society or credit union <u>statement or pass book</u> - containing current address • Most recent <u>mortgage statement</u> - from a recognised lender* • Current local council <u>rent card or tenancy agreement</u> * • Current <u>benefit book or card</u> or original notification letter from Department of Work and Pensions (<u>DWP</u>) - confirming the rights to benefit • Confirmation from an <u>electoral register search</u> -that a person of that name lives at the claimed address* • <u>Court order</u> * <p>* The date on these documents should be within the last <u>three months</u> (unless there is a good reason for it not to be, e.g. clear evidence that the patient was not living in the UK for three months or more) and they must contain the name</p>
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	<p>and address of the applicant.</p> <p>Acceptable forms of identification documents for children: (Children under 16)</p> <ul style="list-style-type: none"> • Birth certificate * • Medical Card * • Adoption certificate * • Court order proving parental responsibility * <p>* Original copies only (Photocopies will not be accepted)</p> <p>If documents are seen at registration this should be completed on the registration forms. <u>Identifications must not be scanned onto the patient's notes and if photocopies are taken these must be shredded after verification is read coded.</u></p>
Recording of identity evidence	<p>Identity verification follows legal, professional and ethical standards. The name of the person verifying an applicant's identity, the method used and date should be recorded in the patient's records. This can be achieved by scanning in the completed application form but not identifications</p>

6. ARRANGEMENTS FOR PROXY ACCESS

Definition - Proxy access is the inclusive term which describes provision of access to a patient's parents, relatives and/or carer(s) so they can book appointments, order repeat prescriptions and/or view the medical record on the patient's behalf

Consent – All proxy access requires signed written consent of the patient unless covered by the exclusions below. Consent is deemed to be present where there is evidence of

- Legally recognised power of attorney
- Signed consent for a named formal carer where in the opinion of the GP the patient has the mental capacity to make such a decision
- The legal parent or guardian of a child under the age of 11

For young people aged 11-16 please see sections 7 below

Exclusions

- Practice staffs have good grounds for suspicion that the patient is not giving access freely.
- Authorised practice staff believes a patient aged under 16 is competent to make a decision on access but that child has not given consent for proxy access to the person who is seeking it.
- There is a risk to the security of the patient's record by the person being considered for proxy access.
- The patient has previously expressed the wish not to grant proxy access to specific individuals should they lose capacity, either permanently or temporarily; this should be recorded in the patient's record

- The patient's GP assesses that it is not in the best interests of the patient

7. YOUNG PERSONS AGED 11 TO 16 - ARRANGEMENTS

Until a young person's 11th birthday parents and guardians have proxy access to the child's coded medical record. Parental proxy access will be switched off on the 11th birthday.

Between the ages of 11-16 online access to the coded medical record will not be granted.

The reason for this policy is that young people develop capability of acting autonomously at different ages. Children under the 16 age of do have a right to confidentiality. We wish to avoid the sensitive and difficult issues around 11-16 year olds trying to prevent continued parental access and to ensure that the online facility access fact becomes available personally to young people at aged 16.

8. READ CODING

- **Patient identity verified 9RN. – Photo ID**
- **Patient contact details verified 91B5. – Address confirmation**

These should be added to the clinical notes at time of registration with the practice or when the patient completes the Patient online access request form.

9. ROLES AND RESPONSIBILITIES

	Staff responsible	Frequency	Notes
<p><u>Management</u> Policy development and variation</p> <p>Lead Responsible for:</p> <ul style="list-style-type: none"> - oversight of the access management process - identification of other roles - leading incident investigation - Performance / compliance monitoring to Exec Team 	<p>Practice Mgr</p> <p>Office Manager and Performance Manager</p>	<p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p> <p>As arises</p> <p>Monthly</p>	
<p><u>Verification</u></p> <ul style="list-style-type: none"> - Quality check and training in operational aspects - Identity verification by presentation of documents <p>Individuals who are authorised to verify the identity of applicants by presentation of documents.</p>	<p>Performance or Office Manager(s)</p> <p>Admin and Senior Reception Team, Business Partner Manager, Office and Performance Managers</p>	<p>Ongoing</p> <p>Ongoing</p>	
<p><u>Registration</u> Registration and consent for online services - individuals authorised to register users on the system for access to online services, and also manage credentials including passwords – <i>excludes personal record access.</i></p>	<p>Reception Manager, Office and Performance Manager</p>	<p>Ongoing</p>	

<u>Access to personal medical records</u> Authorisation of access to coded personal medical records	GPs	Ongoing	
<u>Proxy access authorisation</u> - New requests - - Switch off at age 11	GP Performance Manager	Ongoing Monthly	Search – letters
<u>Young people nearing age 16</u> - Notify entitlement to online access	Office Manager	Monthly	
<u>Read coding</u> Verification Consent	Read coders	Ongoing	

Policy March 16
Review Date April 17

APPENDIX A

Patient wishing to have access to Patient On-line Services

If patient wished to have access to **appointments on-line and view medications, and allergies** ask patient to complete Online Access Registration form and inform them of the identification documents required. Please inform the process can take up to 21 days. When form is returned please give to Reception Manager, Performance Manager or Office Manager.

The **receptionist** will check identification and complete the practice use only section at the bottom of the form for the first two lines only e.g. patients NHS Number, EMIS ID, their initials, date and ID (this is because you have to see originals NO photocopies).

- The form should be then passed to the reception Manager or deputy to either grant or decline access after speaking to the patients usual GP. If access is granted they will issue a username and password which is printed from front desk and posted to the patient.
- The Manager will read code onto the clinical system;
- **9RN** Patient Identity verified (Photo ID)
- **91B5** Patient contact details verified (address confirmation)
- Scan Online Registration Form onto the patient record. **DO NOT SCAN any identification documents.**
- If GP feels patients is **unsuitable for access**, then manager will contact the patient to advise them.

Proxy Access

Proxy access is the inclusive term which describes provision of access to a patient's parents, relatives and/or carer(s) so they can book appointments, order repeat prescriptions and/or view the medical record on the patient's behalf

Please ask the person to complete the Proxy Consent form and inform them of the identification documents required. Please inform the process can take up to 21 days.

When form is returned please follow next step.

The **receptionist** will check identification and complete the practice use only section at the bottom of the form for the first two lines only e.g. patients NHS Number, EMIS ID, their initials, date and ID (this is because you have to see originals NO photocopies).

- The form should be passed to the Office Manager or Performance Manger who will speak to the patients usual GP to establish if the patient is suitable to have access to their Detailed Care Record (DCR). If access is granted the manager will need to follow procedure in Appendix B, this will activate the DCR on Front Desk.
- Contact patient to inform them of the decision and explain how to access the record.
- The Manager will read code onto the clinical system;
- **9RN** Patient Identity verified (Photo ID)
- **91B5** Patient contact details verified (address confirmation)
- Scan Online Registration Form onto the patient record. **DO NOT SCAN any identification documents.**

If permission is declined by the GP, the manager is to inform the patient, either by telephone or by letter.

If patient wishes to have access to **Medical Records online** please ask to complete an Online Access Registration Form and inform them of the identification documents required. Please inform the process can take up to 21 days. When form is returned please give to either Performance Manager or Office Manager.

The **receptionist** will check identification and complete the practice use only section at the bottom of the form for the first two lines only e.g. patients NHS Number, EMIS ID, their initials, date and ID (this is because you have to see originals NO photocopies).

- The form should be passed to the Office Manager or Performance Manger who will speak to the patients usual GP to establish if the patient is suitable to have access to their Detailed Care Record (DCR). If access is granted the manager will need to follow procedure in Appendix B, this will activate the DCR on Front Desk.
- Contact patient to inform them of the decision and explain how to access the record.
- The Manager will read code onto the clinical system;
- **9RN** Patient Identity verified (Photo ID)
- **91B5** Patient contact details verified (address confirmation)
- Scan Online Registration Form onto the patient record. **DO NOT SCAN any identification documents.**

If permission is declined by the GP, the manager is to inform the patient, either by telephone or by letter.

Types of approved Identification documents for Patient Online Access

Accepted photographic identification include:

- Current UK (Channel Islands, Isle of Man or Irish) **passport** or EU/other nationalities passport
- **Passports** of non-EU nationals , containing UK stamps, a visa or a UK residence permit showing the immigration status of the holder in the UK*
- A current UK (or EU/other nationalities) **photo-card driving licence** (providing that the person checking is confident that non-UK photo-card driving licences are bona fide)
- A **national ID card** and/or other valid documentation relating to immigration status and permission to work.*

Any document that is not listed above (i.e. an organisational ID card) is not acceptable.

Accepted confirmation of address documents include:

- A recent **utility bill** (gas, electricity or phone) or a certificate from a supplier of utilities confirming the arrangement to pay for the services on pre-payment terms (note: mobile telephone bills should not be accepted as they can be sent to different addresses). Utility bills in joint names are permissible*
- **Local authority tax bill** - valid for the current year*
- Current **UK photo-card or old-style driving licence** (if not already presented as a personal ID document)
- Bank, building society or credit union **statement or pass book** - containing current address
- Most recent **mortgage statement** - from a recognised lender*
- Current local council **rent card or tenancy agreement** *
- Current **benefit book or card** or original notification letter from Department of Work and Pensions (**DWP**) - confirming the rights to benefit
- Confirmation from an **electoral register search** -that a person of that name lives at the claimed address*
- **Court order** *

* The date on these documents should be within the last ***three months*** (unless there is a good reason for it not to be, e.g. clear evidence that the patient was not living in the UK for three months or more) and they must contain the name and address of the applicant.

Acceptable forms of identification documents for children: (Children under 16)

- Birth certificate *
- Medical Card *
- Adoption certificate *
- Court order proving parental responsibility *

* Original copies only (Photocopies will not be accepted)If documents are seen at registration this should be completed on the registration forms. **Identifications must not be scanned onto the patient's notes and if photocopies are taken these must be shredded after verification is read coded.**

APPENDIX B

Detailed Care Record (DCR) In Appointments Online

In version 4.0.17 and above there's now an option for patients (on request) to view their 'Detailed Care Records' through their Appointments Online login.

The Information given to the patient will be a list of all coded interactions with the practice including the date and description of the interaction.

The practice can enable the detailed care record in Utilities | Appointments Online | Settings tab | Untick - 'Prevent Patients from seeing or requesting detailed care record' |OK.

Note: 'Prevent Patients from seeing or requesting detailed care record' is ticked (disabled) by default.

Below is the workflow should the detailed care record option be enabled:-

- Patient requests access at the practice (asks to see their detailed care record)
- If the patient's suitable the practice enables the detailed care records online option in the patients cardfile | Access tab | tick 'allow patient to see detailed care records online' | OK
- This information is sent to AO during the synchronisation process
- An option for patient to enable access to DCR is made available to the patient
- Patient is advised to log in to AO | Click on Change my details | tick "Opt into detailed care record" | Click on request change of details

NOTE: The patient WILL NOT see the "opt into detailed care record" option unless the practice have enabled this in their patient cardfile beforehand.

- This request is sent back to FrontDesk during the synchronisation

Patient logs back in to AO and 'View Detailed Care Records' is displayed on the right

APPENDIX C

Preston Grove Medical Centre

Consent to proxy access to GP online services

Note: If the patient does not have capacity to consent to grant proxy access and proxy access is considered by the practice to be in the patient’s best interest section 1 of this form may be omitted.

Section 1

I,..... (name of patient), give permission to my GP practice to give the following people

..... proxy access to the online services as indicated below in section 2.

I reserve the right to reverse any decision I make in granting proxy access at any time.

I understand the risks of allowing someone else to have access to my health records.

I have read and understand the information leaflet provided by the practice

Signature of patient	Date
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Section 2

Online appointments booking	<input type="checkbox"/>
Online prescription management	<input type="checkbox"/>
Accessing the medical record for (name of patient)	<input type="checkbox"/>

Section 3

I/we..... (names of representatives) wish to have online access to the services ticked in the box above in section 2 for (name of patient).

I/we understand my/our responsibility for safeguarding sensitive medical information and I/we understand and agree with each of the following statements:

1. I/we have read and understood the information leaflet provided by the practice and agree that I will treat the patient information as confidential	<input type="checkbox"/>
I/we will be responsible for the security of the information that I/we see or download	<input type="checkbox"/>
I/we will contact the practice as soon as possible if I/we suspect that the account has been accessed by someone without my/our agreement	<input type="checkbox"/>
If I/we see information in the record that is not about the patient, or is inaccurate, I/we will contact the practice as soon as possible. I will treat any information which is not about the patient as being strictly confidential	<input type="checkbox"/>

Signature/s of representative/s	Date/s
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The patient

(This is the person whose records are being accessed)

Surname	Date of birth
First name	
Address	
	Postcode
Email address	
Telephone number	Mobile number

The representatives

(These are the people seeking proxy access to the patient's online records, appointments or repeat prescription.)

Surname	Surname
First name	First name
Date of birth	Date of birth
Address	Address (tick if both same address <input type="checkbox"/>)
Postcode	Postcode
Email	Email
Telephone	Telephone
Mobile	Mobile

For practice use only

Patient NHS number		Practice computer ID number	
Identity verified by (initials)	Date	Method	Photo ID and proof of residence <input type="checkbox"/> Children (See Policy) <input type="checkbox"/>
Authorised by (GP or NP for Medical Record Access)			Date
Date Notes Reviewed by GP or NP			
Date Form Scanned onto notes			
Date account created and enabled		<input type="checkbox"/> appointments <input type="checkbox"/> repeat <input type="checkbox"/> medical record	
Level of record access enabled		Notes / explanation	
All <input type="checkbox"/> Prospective <input type="checkbox"/> Retrospective <input type="checkbox"/> Detailed coded record <input type="checkbox"/> Limited parts <input type="checkbox"/>			

APPENDIX D

PRESTON GROVE MEDICAL CENTRE

Application for online access to my medical record

Surname	Date of birth
First name	
Address	
Postcode	
Email address	
Telephone number	Mobile number

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

1. Booking appointments	<input type="checkbox"/>
2. Requesting repeat prescriptions	<input type="checkbox"/>
3. Accessing my medical record	<input type="checkbox"/>

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

1. I have read and understood the information leaflet provided by the practice	<input type="checkbox"/>
2. I will be responsible for the security of the information that I see or download	<input type="checkbox"/>
3. If I choose to share my information with anyone else, this is at my own risk	<input type="checkbox"/>
4. If I suspect that my account has been accessed by someone without my agreement, I will contact the practice as soon as possible	<input type="checkbox"/>
5. If I see information in my record that is not about me or is inaccurate, I will contact the practice as soon as possible	<input type="checkbox"/>
6. If I think that I may come under pressure to give access to someone else unwillingly I will contact the practice as soon as possible.	<input type="checkbox"/>

Signatur	Dat
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For practice use only

Patient NHS number		Practice computer ID number	
Identity verified by (initials)	Date	Method Photo ID and proof of residence <input type="checkbox"/> Children (See Policy) <input type="checkbox"/>	
Authorised by (GP or NP for Medical Record Access)			Date
Date Notes Reviewed by GP			
Date Form Scanned onto notes			
Date account created and enabled		<input type="checkbox"/> appointments <input type="checkbox"/> repeat <input type="checkbox"/> medical record	

Level of record access enabled	Notes / explanation
All <input type="checkbox"/>	
Prospective <input type="checkbox"/>	
Retrospective <input type="checkbox"/>	
Detailed coded record <input type="checkbox"/>	
Limited parts <input type="checkbox"/>	

Notes to be reviewed within 21 days of receipt