The Weavers Practice

Online Access to your medical records

There are two online apps which you can use to access your medical records, these are Patient Access and MyGP – these are both secure websites which require registration.

To register for online access, you must be fully registered with The Weavers Practice. You will need to fill in an "online access" form and show some photographic I.D to be eligible to use this service.

Practices are obliged to assist access to medications, allergies and adverse reactions as a minimum and from the 1st April 2020 coded data, however this requires additional considerations as outlined below. You will be asked that you have read and understood this information before consenting and applying to access your records online. The practice will also need to verify your identity.

Please note:

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

Key considerations

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 to you. This may occur before you have spoken to your doctor or while the surgery is closed, and you cannot contact them.

Choosing to share your information with someone

It's up to you whether 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.

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

Online access to my medical record

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

| Booking appointments | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------|---------------|-----------------------------|--------------------------------------------------------------------------|--|
| 2. Requesting repeat prescriptions | | | | |
| 3. Access to my detailed medical records | | | | |
| , | | | | |
| I wish to access my medical record online and understand and agree with each statement (tick) | | | | |
| I have read and understood the information provided by the practice | | | | |
| 2. I will be responsible for the security of the information that I see or download | | | | |
| 3. If I choose to share my information with anyone else, this is at my own risk | | | | |
| 4. I will contact the practice as soon as possible if I suspect that my account has been accessed by someone without my agreement | | | | |
| 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 | | | | |
| Signature: | | | Date: | |
| For Practice use only | | | | |
| Patient NHS number | | Practice computer ID number | | |
| Identity verified by: (initials) | <u>Date</u> : | <u>Method</u> Vou | uching with information in red Photo ID and proof of reside | |
| Authorised by: | Date | | | |
| Documents from date: | | _ _ | Medications and allergies are manda Reviewing GP to indicate access leve | |

from date: _____

Consultations