The Stubbington Medical Practice Consent to proxy access to GP online services Child up to age of 10 years old

Please note – Proxy access is only given to registered carer's or patients with parental responsibility and at the discretion of the GP. Proxy access can be removed if requested by the patient or at the age of 11 years old -whichever is sooner.

Please provide a proof of address or a piece of photo ID with this application form.

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Section 1		
Online appointments booking		
Online prescription management		
3. Accessing the medical record for (name of	f patient)	
Section 2		
I	resentative) wish
for (name of patient).		
I understand my responsibility for safeguarding sensitive medical information and agree with each of the following statements:	I understa	nd and
I have read and understood the information leaflet provided by the practice and agree that I will treat the patient information as confidential		
2. I will be responsible for the security of the information that I/we see or download		
3. I will contact the practice as soon as possible if I/we suspect that the account has been accessed by someone without my/our agreement		
4. If I 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		
Signature of representative	Date	
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 representative

(This is the person seeking proxy access to the patient's online records, appointments or repeat prescription.)

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

For practice use only

The patient's NHS number		The patient's practice computer ID number	
Identity verified by (initials)	Date		Vouching ☐ information in record ☐ nd proof of residence ☐
Proxy access authori	sed by		Date
Date account created	t		
Date passphrase sen	t		
Level of record access enabled		Notes / comments on proxy access	
Р	rospective □		
Retrospective □			
	AII □		
Limited parts □			
Contractua	I minimum 🗆		

Application for DETAILED CODED RECORDS ACCESS – PLEASE READ THIS INFORMATION

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 we can remove online access until you are able to reset your password.

If you print out any information from their 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 a number of reasons such as concerns that it could cause harm to physical or mental health or where there is reference to third parties. The practice has the right to remove online access to services for anyone that doesn't use them responsibly.

If you think you may be pressured into revealing details from the patient's record to someone else against your will, it is best that you do not register for access at this time.

Timescales

Booking appointments, requesting repeat prescriptions, Questionnaires and Summary Care Record access will take up to 5 days to action. If required, your request for detailed coded records access will be given to your doctor to consider. This can take up to 28 days to action as clinical work takes priority over administrative tasks such as this. Upon approval, this function will be added to your online account.

I read and understood all the information above and read the timescales			
Signature:	Date:		