**Application for online access**

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

[ ]  **I am requested online access for myself** Patient’s signature ………..……………………………

[ ]  **Proxy access requested** *(please tick reason for requesting Proxy access below)*

[ ]  Patient under the age of 11 [ ]  Patient aged between 11-16

[ ]  I have POA for the patient [ ]  lacking capacity [ ]  I am a carer for the patient

***Parents/guardians may represent 11 - 16 year olds with their permission***

I consent to the named person applying for Patient Access on my behalf and collecting my registration documents.

Relationship to patient …………………….……………… Name ……………………………………

Patient’s signature ………………………………………….. Date …………………………………..

I wish to have access to the following online services (please put an X in all that apply):

|  |
| --- |
| **1.** Booking appointments |[ ]
| **2.** Requesting repeat prescriptions |[ ]
| **3.** Immunisations |[ ]
| **4.** Test results |[ ]
| **5.** Consultations *(when access becomes available in the future)* |[ ]

I wish to have online access and understand and agree with each statement (X)

|  |
| --- |
| **1.** I have read and understood the guidance information overleaf |[ ]
| **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.** If I suspect that my account has been accessed by someone without my agreement, I will contact the practice as soon as possible | [ ]  |

# For practice use only

|  |  |
| --- | --- |
| Photo ID [ ]  Passport/Driving Licence / other ……...…. | Seen by: (initials) |
| Proof of residence seen [ ] Date: |
| ID seen by: | Date: |
|  Access Agreed Yes [ ]  No [ ]  If No please give details.Partners signature:  |

**PLEASE REMEMBER THAT ID WILL BE REQUIRED FOR COLLECTION OF REGISTRATION DOCUMENT.**

**(PATIENTS AGED 16 YRS OLD OR OVER MUST COLLECT THEIR OWN DOCUMENTS)**

**Our Practice Guidance for Patient Access**

Before you begin to use EMIS Access we would appreciate it if you could read the following guidance regarding the booking of appointments and ordering repeat prescriptions over the Internet. Please keep this page of the document for your own reference.

**Reasons for Appointment**

You will be required to enter a reason for your appointment. Please be assured that all details entered are secure and cannot be intercepted but can be viewed by our reception team. Our practice has a strict confidentiality policy for all staff.

**Missed Appointments**

Please let us know if you will be unable to attend an appointment that you have booked online. Either contact us by telephone to cancel it or cancel it online. This will allow us to offer the appointment to another patient. We realise that there are valid reasons for not attending. However, we will be monitoring such occurrences on a regular basis. If you miss an appointment more than 3 times in one year we will remove your facility to use EMIS Access, however you will still be able to book appointments with our receptionists.

**Appointments**

Due to the nature of nurses’ appointments we are unable to offer many of them online at this time. However, Blood test, Blood Pressure and some Chronic Disease review appointments are available. We do hope to be able to offer more in the future. Please ensure that you book the appointments appropriately. If you are unsure as to whether it is appropriate for you to see a nurse or a doctor please contact us by telephone.

**Repeat Prescription Requests**

You can order your own repeat prescriptions on line via the Patient Access facility. Once you have registered for Patient Access and you have logged into the website it will offer you the option of booking an appointment or requesting a repeat prescription. PLEASE NOTE: you can only request medication that has been set as a repeat prescription. If you have been issued with medication by your GP to try or on a one-off or acute basis, you will need to contact your GP to discuss whether it can now be changed to a repeat. Until it has been changed in your medical records it will not show up on the Patient Access website.

**Inappropriate use**

We monitor the use of this service and we are sure that you will find it useful. However, if we find any abuse of the service, we will revoke your access to the service and you will have to liaise with our reception team for services. We would consider inappropriate use as: sending inappropriate or abusive messages, booking appointments and not using them more than 3 times a year, booking appointments for other family members using your own name.

**Your Responsibility**

The practice will take every measure to ensure that your Patient Access application is secure. It is your responsibility to ensure that your Patient Access account remains this way. You are able to terminate or reset your Patient Access Account at any time by contacting the surgery in writing. You may wish to do this if you think someone else knows your log in details or if you have shared details with a family member or partner and no longer wish them to know these details.

You can request to access to your medical records. This is done by completing our Medical Records request form which is then passed to your Named GP Partner for authorisation. Your GP may not think that it is in your best interest for you to have access, if this happens your GP will discuss this with you. This process could take up to 3 months.

*Please note that once a young person has reached 16 years of age, their registration will automatically be cancelled and they will need to re-register themselves.*

**Please note that the practice does not manage the Patient Access Website and, therefore, cannot provide help with using the Patient Access. Help screens are provided on the Website.**

 25th August 2019