



# Record Access

## Information for patients

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### WHAT DOES IT MEAN FOR ME?

The purpose of your records is to help clinicians give you high-quality care. You have had the right to view your health records for many years and health professionals already share records in many ways, for example by turning the screen to face you or inviting you to check prescribing details.

#### WHAT IS RECORD ACCESS?

This is using computers to let you see your electronic medical records, either in the GP surgery or by logging in from home.

A report has been written by GPs, *Enabling Patients to Access Electronic Health Records: guidance for health professionals* ([www.rcgp.org.uk/get\\_involved/informatics\\_group.aspx](http://www.rcgp.org.uk/get_involved/informatics_group.aspx)), to help other GPs who wish to set up Record Access for patients in their own practices.

This leaflet explains how it could work for you.

#### WHY WOULD I WANT TO LOOK AT MY RECORDS?

Record Access can give you most benefit if used as part of your care. It can be used to see things like test results or to order repeat prescriptions. Some GP systems will be able to let you see your whole record, but not all primary care computer systems give access for patients. It is wise to check with your surgery first and ask whether they provide this service.

Record Access should:

- enable you to understand the information in your records
- help you make use of that information
- be linked with targeted health information and decision support
- lead to discussions with your health professionals and encourage a more open and honest relationship.

By having links in your record to appropriate sites, the record could offer you a range of facilities and advice about improving your health and managing any disease.

If you feel that you do not understand something or that something has gone wrong, you can use your record to help clarify things. You can also share the record with family members or carers as you choose.

Record Access should not:

- be a substitute for all other forms of information
- be compulsory
- cost you anything.

#### CAN I LOOK AT MY CHILDREN'S RECORDS?

Parents and anyone with parental responsibility for children are entitled to access a child's medical records in the child's best interests. If your children are considered by a health professional to be able to make their own decisions ('Gillick competent') then you can only look at their records with their permission.

#### CAN I LOOK AT MY PARENTS' RECORDS?

Carers and family members can look at records if they have the patient's permission and signed consent. Practices may feel uneasy about giving access to electronic records to other family members, so any requests by you should be discussed with your practice. There are provisions under the Mental Capacity Act 2005 in England and Wales for access by an authorised person to records of patients that cannot do this for themselves, for example people with severe dementia or learning difficulties.

#### WHEN WON'T I BE ALLOWED TO ACCESS MY RECORDS?

Your practice may not allow you to access your full record if it is likely to cause serious harm to the physical or mental health of you or any other person, or if it might contain information about another person who has not given permission for you to see it. In those cases, some information from the record may be kept from you.

### CAN I HAVE COPIES OF MY HOSPITAL LETTERS?

The NHS Constitution 2009 includes a pledge to share any letters sent by clinicians to their patients. This is gradually being adopted across the NHS, and the British Medical Association has published guidance for doctors on copying letters to patients. This states that, although copying letters to patients is not an obligation for doctors, it can bring benefits, for example:

- providing reassurance that the practice has been informed of treatment by a hospital
- making sure that misunderstandings can be corrected or explained
- providing a helpful reminder of complex or important information.

### HOW DO I BEGIN?

Most clinicians are doing Record Access in a limited way already: by turning the screen round to face you, asking you to check details of prescriptions, and printing out results or letters for you to take home. This can help to improve the accuracy of your records.

Some systems allow password access to the whole record. This can be done either remotely from home or through touch screens in the waiting room. Some systems have not yet developed this type of software, so you will need to check with your GP practice.

If your practice offers it, they should help you by explaining how they will set up your Record Access and also tell you about arrangements for dealing with your questions or requests for corrections or alterations.

Your practice will explain what sort of identification is required and will be responsible for allocating passwords safely to ensure that there is no possibility of coercion or abuse. The final decision whether to grant access to any patient rests with the clinician.

### ARE THERE ANY RISKS TO VIEWING MY RECORDS?

When you see your records, there is always the possibility that you might see a diagnosis that you don't agree with, or see comments that upset or confuse you. Although some clinicians already copy letters to patients, not all will write them in a way that you can understand, though all health professionals are advised to write as clearly as possible. Sometimes your record may talk about different possible diagnoses in order to help to plan diagnostic tests and treatments. This can lead to difficult or uncomfortable conversations but can also lead to openness. Health professionals are advised to share these options and decisions with patients but to make clear in their records when something is just a possibility. Where you are able to see test results, you should ask whether they will include an explanation and further information on what to do next.

### CAN I ADD TO MY HEALTH RECORD?

This could be as simple as starting with checking that details such as name and address are correct or confirming accuracy, e.g. of allergies. Increasingly, patients are being asked to provide details such as results of home blood pressure readings or diabetes blood sugar tests, and in the future you may be asked to add these to your record.

### WHAT ELSE DO I NEED TO KNOW?

You should ask how you can access your records. You may be asked to sign an agreement that you have read and understood the processes necessary to take part in Record Access. You should also ask what to do if you change your mind about having access, or about the access rights you have given to others.

### CAN I SHARE MY OWN RECORDS WITH ANYONE ELSE?

One of the great benefits of Record Access is that you can choose to share your records with those treating you anywhere in the NHS, and anywhere in the world. You may also wish to share your records with family members or others by giving them direct access. If so, you need to be fully aware of the risks and understand that you are responsible for any consequences of your decision to share your confidential information, particularly if considering sharing that information through social networking sites. If your practice suspects any possibilities of someone forcing you to give them access to your records, they will not allow Record Access as your safety is paramount.

### FINALLY

Health records can be safely shared and can improve your care. Sharing records can benefit relationships, understanding, health outcomes and safety. This is a very new development for clinical care and many health professionals are very anxious about getting started. Everyone needs to work together to maximise the benefits, minimise the risks, and learn lessons from this new development so that it leads to improvements in your health and care.

The RCGP Record Access report referred to near the beginning of the leaflet provides further, detailed guidance. The full report describes a number of cases to illustrate the issues that may arise from Record Access in different cases.

### Your Practice Contact Details:

[www.rcgp.org.uk/patientcentre](http://www.rcgp.org.uk/patientcentre)

The report has been endorsed by Arrhythmia Alliance, the Atrial Fibrillation Association, the British Dietetic Association, the College of Occupational Therapists, the Department of Health, the Faculty of Dental Surgery – Royal College of Surgeons of England, the Gorlin Syndrome Group, HPTH (Hypoparathyroidism) UK, the Institute of Health Records and Information Management, the Medical Protection Society, Migraine Action, the Nursery and Midwifery Council, the Pelvic Pain Support Network, the Royal College of General Practitioners, the Royal College of Nursing, the Royal College of Paediatrics and Child Health, the Royal College of Physicians, the Royal National Institute of Blind People, and the Syncope Trust And Reflex anoxic Seizures (STARS).