

Patient Prospective Online access to records and Safeguarding matters

Dr Helen Jones named GP for child safeguarding

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The GP contract 2023/24 stated that by 31st October 2023 general practices must provide patients online access to their prospective records (unless they have individually decided to opt-out or any exceptions apply). This allowed patients (16yr+) to have online access to data entered prospectively into their GP records accessed via their patient facing apps.

The purpose of this brief guide is to help support practice staff by highlighting the tools/actions available to minimise risk of harm.

What the patient CAN see online with prospective online access	What the patient CAN'T see
<ul style="list-style-type: none"> • Appointments • Medication lists (Both acute and repeat in all apps, whilst past drugs also show in the NHS App) • Allergies • <i>Documents / letters (become visible once the data has been fully filed or “completed” through Docman or the clinical system - leave the report “unfiled” if patient needs to be contacted first to inform them)</i> • <i>Test results – ditto</i> • <i>Coded data, including Problem lists</i> • <i>Consultation entries – codes and free-text</i> • Immunisations 	<ul style="list-style-type: none"> • Retrospective data entered onto the consultation screen prior to 31/10/23 • Any data entered before the date that the patient registered with your surgery • Any data entered before the patient turned 16 • Tasks (e.g., Admin notes; Patient notes – though bear in mind these could be requested to view by the patient via a Subject Access Request) and internal communication in practice (e.g.screen messages) • Major alerts / “Warnings”

Practice options for mitigating risk of harm to patients

Options available	Action	Further considerations
<p>Stopping default patient access to online records</p> <p>This option is only for those patients who have certain mental health or safeguarding codes (these patients can be found by running searches)</p> <p>The patient will continue to have access to appointment booking and repeat prescriptions</p>	<p>Add Snomed code 104</p> <p><i>{Enhanced review indicated before granting access to own health record}</i></p>	<p>1. Patients would need to proactively request online access. Their requests would then be processed according to practice policy.</p> <p>2. New registrations should be reviewed & consideration as to whether 104 code needs to be added. NB historical codes may get pulled into prospective summaries and letters</p>
<p>Block online visibility of particular consultations or documents</p>	<p>Apply online invisibility function on emis</p>	<p>Advisable for all entries relating to Safeguarding as a means of redaction as the record may be unrestricted in the future and heighten riskⁱ</p> <p>eg social service referrals CP/CIN Case conference minutes domestic abuse notifications letters containing third party information etc</p> <p>Ensure that ALL staff entering info/processing incoming correspondence are aware/able to do this Don't forget new joiners, locums and trainees</p>
<p>Block visibility of consultations from other HCPs/non clinicians (not online invisibility)</p>	<p>Activate Confidentiality padlock</p> <p>3 options eg Organisational clinician Clinician Other</p>	<p>Generally, only used for highly sensitive entries that you would not want other allied health professionals or non-clinicians to view</p>

Headlines with respect to cSG entries:

- 1) Ensure 104 code in place (so that when YP turns 16 prospective access does not automatically switch on)
- 2) Use online invisibility function for individual entries/correspondence relating to safeguarding matters

NB EMIS child safeguarding CEG template v6 prompts/supports both of these actions

Parental Proxy Access (PPA) to their child's online records and services

A proxy may have access to the **patient's record** as well as to e.g. appointment booking and repeat prescription requestsⁱⁱ.

The proxy is given their own online access account (rather than using the patient's login details). It is often used by the parents or recognised carers of young children, and recognised carers of adults. The level of access can be different from that of the patient, and agreed levels of access must be confirmed in the consent form and recorded in the patient's notes. Eg. able to view the patient's SCR (summary care record), patient's DCR (detailed coded record) or patient's full GP record.

Legitimate reasons for authorising access to a proxy include when the GP (or authorised practice staff) has obtained the patient's explicit consent to enable access.

Such consent should be obtained both from adult patients with capacity and competent children. Children aged 16 or above are assumed to be competent unless there is an indication otherwise.

Milestones/age of YP	Parental proxy access (PPA)	Other considerations
<11years	PPA is usually in place for their child's record and GP Online Services	
@11 years	PPA to the YP's online record should be switched off automatically ⁱⁱⁱ to avoid the possibility of: <ul style="list-style-type: none"> • Sudden withdrawal of proxy access by the practice alerting the parents to the possibility that the child or young person has been to the practice about something that they wish to remain private. • The young person being deterred from coming to the practice for help. 	The practice may want to contact parent or guardian/ CYP to inform them eg send an accurx message All decisions to be made in line with YP's wishes if they have capacity/ according to best interest principles Eg PPA to the YP's online services may continue after careful discussion with the GP, if it is felt to be in the child's best interests.

11-16 years	<p>Parental rights yield to the child's right to make their own decisions.</p> <p>The competent young person may decide to stop parental proxy access to online services or restrict proxy access to transactional features</p>	If parent requests proxy access this needs to be processed according to practice proxy access policy
@16 years	<p>PPA should be switched off (unless YP has given informed consent or lacks capacity)</p>	

As explained previously any safeguarding entries/third party info should be redacted via use of online invisibility and 104 enhanced review code added.

The GPSoC contract requires GP system suppliers to make automatic changes to the proxy access available to children's records at these birthdays

Resources and appendix

[RCGP Proxy consent fom.docx \(live.com\)](#)

[Accelerating Citizen Access - brief guide FINAL 21.09.22.docx.pdf](#)

[Children and young people.docx \(live.com\)](#)

[0-18 years: guidance for all doctors](#)

ⁱ [Safeguarding and automatic record access.docx \(live.com\)](#)

ⁱⁱ [Proxy Access.docx \(live.com\)](#)

ⁱⁱⁱ [Children and young people.docx \(live.com\)](#)